

INSTRUCTIONS FOR PAYING BY CREDIT CARD FOR A NON-CERTIFIED COPY OR CERTIFIED COPY

FOR MARRIAGE LICENSE COPIES: COMPLETE SECTIONS 1 AND 2.

FOR PROPERTY, MAP & CONDO RECORDS AND FORECLOSURE NOTICE COPIES: COMPLETE SECTIONS 1 AND 3.

FOR MISC. PERSONAL RECORDS, DD214'S, AND DBA APPLICATION COPIES: COMPLETE SECTIONS 1 AND 4.

****** FOR BIRTH OR DEATH RECORD COPIES, VISIT <http://www.cclerk.hctx.net/PersonalRecords.aspx#Vital>******

FORM SECTION DETAILS

SECTION 1. Please complete Section 1 entirely. If you do not have a fax number or email address, please put "N/A".

Please select on the appropriate line (Certified or Non-Certified), the type of copy, the number of copies requested, and how you would like your order delivered to you (faxed, emailed, to be picked up, or mailed).

Note: Certified copies can ONLY be mailed or picked up. Non-certified, plain copies can be emailed, mailed, faxed or picked up in person.

If you would like both certified and non-certified copies, please select accordingly on the form.

SECTION 2. Please fill out names of both applicants. (First, middle, & last names used at the time of application)

SECTION 3. Please fill out type of document (i.e. Deed of Trust, Warranty Deed, Lien, Abstract of Judgment, etc.).

Please put property address in the address field.

Include Subdivision Name, Section, Lot, and Block, if known. (Located on your tax statement)

Include Grantor (Seller, Borrower or Plaintiff) Name in the Grantor field.

Include Grantee (Current Owner, Lender or Defendant) Name in the Grantee field.

Include the file number and film code number, if known.

Note: If more than one document is needed, please attach a separate page with the information along with this form. (Do NOT send more than one completed credit card form).

SECTION 4. Include file number and film code, if known.

Include type of document (i.e. Assumed Name/DBA application, Hospital Lien, Misc. Personal Record, etc.).

Include the name on record.

The fees for paper copies are as follows:

Non-Certified Paper Copy - \$1.00 per page.

Certified Paper Copy - \$5.00 certification fee per document & \$1.00 per page.

Electronic (non-certified) - \$1.00 per page.

Map or Condominium Records:

Non-certified - \$10.00 per page.

Certified copy - \$15.00 per page.

Options to submit the completed form:

Email: ccoinfoFM@cco.hctx.net

**Mail: Diane Trautman, Harris County Clerk
Attn: Information Department
P.O. Box 1525
Houston, TX 77251**

FAX: 713-437-4868

In Person: At any of our ten (10) locations.

NOTE: When sending the following credit card form, PLEASE DO NOT include this page of instruction.

Fees are subject to change without notice. Call 713-274-6390 for fee verification and assistance filling out this form



OFFICE OF DIANE TRAUTMAN
 COUNTY CLERK, HARRIS COUNTY, TEXAS
 INFORMATION AND PUBLIC SERVICE DEPARTMENT

FIELDS MARKED WITH * ARE REQUIRED

(SECTION 1) PLEASE PROVIDE REQUESTED PAYMENT INFORMATION

*Name of Requestor:		Date:
*Mailing Address:		
*City:	*State:	*Zip:
*Email Address:		
*Phone No.:	*Fax No.:	
*Cardholder Name (If Different from Requestor):		
*Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Exp. <i>There is a 4% surcharge on all services requested by mail, email, phone or fax.</i>		
*Card No. _____		*Expiration Date: ____/____/____
*Card Code _____	*Cardholder's/Authorized User Signature: _____	

TYPE OF COPIES AND METHOD OF DELIVERY REQUESTED

<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Mail	<input type="checkbox"/> Pick up	# of Copies:
<input type="checkbox"/> Non-Certified Copy	<input type="checkbox"/> Mail	<input type="checkbox"/> Pick up	<input type="checkbox"/> Fax
	<input type="checkbox"/> Email	# of Copies:	

(SECTION 2) FOR MARRIAGE LICENSE COPY

Name of applicant 1:	Month/Year:
Name of applicant 2:	License/File #:

(SECTION 3) FOR PROPERTY RECORDS, MAPS, & FORECLOSURE COPIES

Document type:	File number:	Film code:	
Address:			
Subdivision:	Lot:	Block:	Section:
Grantor:	Grantee:		

(SECTION 4) FOR PERSONAL RECORDS, DBA & DD214 COPIES

File number:	Film code:	Date on document:
Document type:	Name(s) on document:	
<u>For County Clerk Use Only:</u>		
Amount: \$	Date:	Fees Assessed By:
Copy Order #	Trans #	
Requested by: <input type="checkbox"/> fax <input type="checkbox"/> phone <input type="checkbox"/> mail <input type="checkbox"/> email	Cashier:	