

STATE OF NORTH CAROLINA

\_\_\_\_\_ COUNTY

### AFFIDAVIT OF PARENTAGE

**If this is a re-adoption by a second adoptive parent, check here  and provide original adoptive parent information below in lieu of biological parent information.**

I, the undersigned, \_\_\_\_\_, being duly sworn,  
[Mother] [Father] [Guardian] [Other Knowledgeable Individual]

declare the following persons to be the parents or possible parents of \_\_\_\_\_,  
(Original Name of Child)

a minor \_\_\_\_\_ child, who was born on the \_\_\_\_\_ day of \_\_\_\_\_,  
(Sex)

[or expected to be born approximately \_\_\_\_\_] in \_\_\_\_\_  
(City or Town)

\_\_\_\_\_  
(County) (State)

**Birth Parent or  
Prior Adoptive Parent 1:** \_\_\_\_\_  
(Name) (Marital status at time of child's birth)  
\_\_\_\_\_  
(Last known address)

**Birth Parent or  
Prior Adoptive Parent 2:** \_\_\_\_\_  
(Name) (Marital status at time of child's birth)  
\_\_\_\_\_  
(Last known address)

**(If more than one possible)  
Biological  
Father:** \_\_\_\_\_  
(Name) (Marital status at time of child's birth)  
\_\_\_\_\_  
(Last known address)

**Legal  
Father:** \_\_\_\_\_  
(Name) (Marital status at time of child's birth)  
\_\_\_\_\_  
(Last known address)

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

Source of my knowledge (if not signed by placing parent or guardian): \_\_\_\_\_

\_\_\_\_\_

FURTHER, it is the intent of the undersigned parent or guardian to place the above-named child for adoption in accordance with Chapter 48 of the General Statutes of North Carolina.

\_\_\_\_\_  
Signature of (Mother) (Father) (Guardian)  
(Other Knowledgeable Individual)

I, \_\_\_\_\_, do hereby certify  
(Name of official)

that \_\_\_\_\_ personally appeared before me this day  
(Name of parent or guardian or other knowledgeable individual)

and acknowledged the due execution of the foregoing instrument.

I certify that I, the undersigned, am a Notary Public or one otherwise empowered to acknowledge signatures under Chapter 47 of the General Statutes of North Carolina.

Witness my hand and seal this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**( S E A L )**

Signature \_\_\_\_\_

Title \_\_\_\_\_

My commission expires \_\_\_\_\_

**NOTE:**

One Form DSS-1809 is obtained at the time the Consent to Adoption (DSS-1802) or Relinquishment to Adoption (DSS-1804) is signed and filed in the adoption proceeding. The Clerk then forwards these documents to the Division of Social Services, State Department of Health and Human Services, after the entry of the final decree.

G.S. 48-3-206 provides that in the event the placing parent or guardian is unavailable, this information may be provided by another knowledgeable individual who should then sign this form and indicate the source of his knowledge. This affidavit is not necessary when an agency acquires legal and physical custody of a minor for adoption by court order terminating the parental rights of both parents or guardian.