

APPLICATION FOR CERTIFIED COPY OF BIRTH RECORD

In an attempt to stop the illegal use of vital records, and as part of statewide efforts to reduce identity theft, a new law (effective July 1, 2003) changed the way certified copies of birth certificates are issued. **Certified Copies** to establish the identity of a registrant can be issued only to authorized individuals, as indicated below. All others will be issued **Certified Informational Copies** that are not valid to establish identity.

Please indicate the type of certified copy you are requesting:

<input type="checkbox"/> I would like a Certified Copy . This copy will establish the identity of the registrant. (To receive a Certified Copy you MUST INDICATE YOUR RELATIONSHIP TO THE REGISTRANT by selecting from the list below AND COMPLETE THE ATTACHED SWORN STATEMENT declaring that you are eligible to receive the Certified Copy. The Sworn Statement MUST BE NOTARIZED if the application is submitted by mail unless you are a law enforcement or local or state governmental agency.)	<input type="checkbox"/> I would like a Certified Informational Copy . This document will be printed with a legend on the face of the document that states, "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY." (A Sworn Statement does not need to be provided.)
---	--

NOTE: Both documents are certified copies of the original document on file with our office. With the exception of the legend, the documents contain the exact same information.

To receive a **Certified Copy** I am:

- The registrant (person listed on the certificate) or a parent or legal guardian of the registrant.
- A party entitled to receive the record as a result of a court order, or an attorney or a licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code.
- A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. *(Companies representing a government agency must provide authorization from the government agency.)*
- A child, grandparent, grandchild, brother or sister, spouse, or domestic partner of the registrant.
- An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate. *(If you are requesting a Certified Copy under a power of attorney, please include a copy of the power of attorney with this application form.)*

APPLICANT INFORMATION (PLEASE TYPE, PRINT, AND SIGN THIS FORM)	Today's Date: _____
---	----------------------------

Agency Name (if appropriate)	Agency Case No. (if appropriate)	Purpose of Request			
Printed Name and Signature of Applicant		Number of Copies	Amount Enclosed		
Mailing Address – Number, Street			Name of Person Receiving Copies, if Different from Applicant		
City	State / Province	ZIP Code	Mailing Address for Copies, if Different from Applicant		
Daytime Telephone (include area code) ()		Country	City	State	ZIP Code

BIRTH CERTIFICATE INFORMATION (PLEASE PRINT OR TYPE)	Adopted: <input type="checkbox"/> No <input type="checkbox"/> Yes <small>If adopted use adopted name and adopted parents names</small>
---	---

BIRTH Name on Certificate (LAST)	FIRST Name on Certificate	MIDDLE Name on Certificate
City of Birth (must be in California)		County of Birth
Date of Birth – MM/DD/CCYY (If unknown, enter approximate date of birth)		Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
BIRTH Name on Certificate – Father/Parent	FIRST Name on Certificate – Father/Parent	MIDDLE Name on Certificate – Father/Parent
BIRTH Name on Certificate – Mother/Parent	FIRST Name on Certificate – Mother/Parent	MIDDLE Name on Certificate – Mother/Parent

BIRTH

