## NEED A BIRTH CERTIFICATE?

# APPLICATION FOR CERTIFIED COPY OF BIRTH RECORD DO NOT Complete the Application Before Reading the Instructions!

- 1. Complete a separate application form for each person whose birth record is requested.
- 2. An Authorized Certified Copy of a birth record will establish the identity of the registrant. An Informational Certified Copy contains the same information but will not establish the identity of the registrant. California law permits only specified persons (as listed on the application) to receive Authorized Certified Copies of birth records. All others may only receive an Informational Certified Copy, marked with the legend "Informational, Not a Valid Document to Establish Identity."
- 3. In the top section of the application, specify whether you are requesting an Authorized Certified Copy or an Informational Certified Copy. If you are requesting only an Informational Certified Copy, you do not need to mark any of the five options on the list or submit the sworn statement on the last page; just complete the "Applicant Information" and "Birth Certificate Information" sections.
- 4. Complete the Applicant Information section and provide your printed name and your signature where indicated. Complete the Birth Certificate Information section, providing all the information you can. Be sure to give the registrant's full name. If the information you furnish is incomplete or inaccurate, we may not be able to find the record. If the registrant has been adopted, please make the request in the adopted name. (If you are requesting a copy of the original sealed birth certificate, you must apply to the State Office of Vital Records with a court order releasing the original sealed record.)

#### 5. SWORN STATEMENT:

For an **Authorized Certified Copy** (which is needed in order to get a driver's license, passport, Social Security card, etc.), you must complete the top section of the application, identifying your relationship to the registrant, and you must sign the attached sworn statement.

If you apply in person, you must sign the sworn statement in the presence of the Office of Vital Records staff. If you mail your request, your sworn statement and signature must be notarized by a Notary Public. (To find a Notary Public, see your local yellow pages or contact your banking institution.) Any request for an Authorized Certified Copy that does not include a notarized sworn statement will be returned without processing. Law enforcement and local and state government agencies are exempt from the notary requirement.

PLEASE NOTE: Only one notarized sworn statement is required for multiple certificates requested at the same time; however, the sworn statement must include the name of each individual whose birth certificate you wish to obtain and your relationship to that individual.

- 6. Submit \$32 (cash, check or money order ONLY) for each Authorized Certified Copy or Informational Certified Copy requested. Indicate the number of copies you want and which type you want, and include sufficient payment with this application, in the form of a personal check or a postal or bank money order (International Money Order for out-of-country requests) made payable to HSA Vital Statistics.
- 7. Submit this application with the sworn statement and payment (cash, check, or money order only) to:

(in person)(by mail, with sworn statement notarized)Office of Vital RecordsOffice of Vital Records1430 Freedom BoulevardP.O. Box 962Watsonville CA 95076Santa Cruz CA 95061

You must complete the application with the correct address information in order to insure prompt processing.

Contact Information: Hours:

(831) 763-8430 Monday-Friday 9:00 am to 4:00 pm

Email: vitalstats@santacruzcounty.us Closed for lunch 12-1

For births **BEFORE** 2020, don't use this form. Contact the County Recorder's Office, 701 Ocean Street #230, Santa Cruz CA 95060; <a href="http://www.co.santa-cruz.ca.us/rcd/recorders/birth&death/maincertificates.htm">http://www.co.santa-cruz.ca.us/rcd/recorders/birth&death/maincertificates.htm</a>; 831/454-2800.

If the birth occurred over six weeks ago, you can also order a birth certificate via the Internet, by logging onto <a href="https://www.vitalchek.com">www.vitalchek.com</a>, using your credit card to process your request, for an additional fee of about \$13.

HSA 884-2 Revised 7/1/2022

#### APPLICATION FOR CERTIFIED COPY OF BIRTH RECORD

### **Santa Cruz County Office of Vital Records**

#### **DO NOT Complete This Application Before Reading the Instructions!**

	Please indicate whether you are requesting an Authorized Certified Copy or an Informational Certified Copy.							
	I would like an <b>Authorized Certified Copy</b> the identity of the registrant. To receive an Copy, you must indicate your relationship to selecting from the following list, and complestatement. If applying by mail, you must hanotarized (unless you are with a law enforce or local government agency).	Authorized C o the registrar ete the attache ave the sworn	ertified nt, by ed sworn statement	☐ I would like an Informational Certified Copy. This document will be printed with a legend that reads "Informational, Not a Valid Document to Establish Identity." For an Informational Certified Copy, you are not required to select from the list below or submit the sworn notarized statement; just complete the "Applicant Information" and "Birth Certificate Information" below.				
I am (check one):								
	The registrant or a parent or legal guardian of the registrant.							
	A child, grandparent, grandchild, sibling, spouse, or domestic partner 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 government agency, as provided by law, who is conducting official business.							
	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 an Authorized Certified Copy under a power of attorney, include a copy of the power of attorney with this application form.)							
В	IRTH CERTIFICATE INFORMATION (F	PLEASE PRIN	T OR TYPE)					
	· · · · · · · · · · · · · · · · · · ·				Child'	hild's Complete Last Name on Certificate		
City or Town of Child's Birth			Coun			ty of Child's Birth		
D	ate of Birth – Month, Day, Year (If unknown	imate date of birth) Sex			☐ Female	☐ Male		
F	ather's First Name on Certificate	Father's Mid	Middle Name on Certificate			Father's Last Name on Certificate		
N	lother's First Name on Certificate	Mother's Middle Name on Ce			ertificate Mother		er's Maiden Name	
APPLICANT INFORMATION (PLEASE PRINT OR TYPE)								
<u>P</u>	Printed Name and Signature of Person Requesting Record			Today's Date			Telephone Number – Area Code First ( )	
N	lailing Address – Number, Street		City	State ZIP Code		ZIP Code		
	Name of Person Receiving Copies, if Different From Above		No. of Copies	\$ Amount Enclosed		E-mail Address		
N	lailing Address for Copies, If Different From A	Above	City				State	ZIP Code

**BIRTH** 

HSA 884-2 Revised 7/1/2022

#### **SWORN STATEMENT**

Ι,	(Your Printed Name)	_, declare, ι	under penalty of perjury under the	laws of the State of California,			
that I am an authorized per	son, as defined in California He	ealth and Sa	afety Code Section 103526 (c), a	nd am eligible to receive a			
certified copy of the birth or	death record of the following in	ndividual(s)	:				
Name of the Child Listed on the Certificate			Your Relationship to the Child Listed on the Certificate				
(The information below must b	e completed in the presence of Offi	fice of Vital R	Records staff or a Notary Public.)				
Declared this	day of(Month)	, 2022, a	t(City)				
(Day)	(Month)		(City)	(State)			
			(Your Signature	)			
Acknowledgment below	w. The Certificate of Ackn	nowledgm	ur sworn statement notarized ent must be completed by a e exempt from the notary rec	notary public. (Law			
	this certificate is attached, a	vidual who	signed the document to which				
	validity of that document.						
	CERTIFICATE	OF ACK	KNOWLEDGMENT				
State of	)						
County of	) ss )						
On	, before me	ne,	insert name and title of the officer)	, personally appeared			
	, who pr	roved to me	e on the basis of satisfactory evidence.	ence to be the person whose			
name is subscribed to the v	vithin instrument, and acknowle	edged to me	e that he/she executed the same	in his/her authorized capacity,			
and that by his/her signatur	e on the instrument the person,	n, or the ent	ity upon behalf of which the perso	on acted, executed the			
instrument. I certify under p	penalty of perjury under the law	vs of the Sta	ate of California that the foregoing	paragraph is true and correct.			
			WITNESS my hand and of (NOTARY SEAL)	ficial seal.			
NOTARY SIGN	NATURE						

HSA 884-2 Revised 7/1/2022