



# APPLICATION FOR CERTIFIED COPY OF: (✓)Box

- The Correction form
- The Acknowledgement of Paternity
- A Testimonial letter

APPLY IN PERSON FOR SAME-DAY SERVICE MAILING AND PHYSICAL ADDRESS

Walk-in Hours:  
Monday-Friday 8:30 am - 3:30 pm

Vital Records  
4300 Cherry Creek Drive South  
Denver, CO 80246-1530

Website: [www.colorado.gov/cdphe](http://www.colorado.gov/cdphe)

Email: [vital.records@state.co.us](mailto:vital.records@state.co.us)

## REQUESTOR INFORMATION

Print name of person making request	First	Middle	Last	Suffix
Mailing Address	Address/City/State/Zip			Daytime Phone
Email Address				
*Relationship to Registrant (Proof of relationship might be needed)	<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Stepchild <input type="checkbox"/> Legal guardian <input type="checkbox"/> Legal Representative (must show proof) <input type="checkbox"/> Other:			
Reason for Request	Give brief explanation why this form is needed: e.g., Travel/Passport, Proof of Name Change, Hospital/MD Name, Other:			

## REGISTRANT INFORMATION: Information about person whose document is being requested - Please type or Print

Full Name at Birth	First	Middle	Last	Suffix
Date of Birth	Month/Day/Year	Place of Birth	City	County
State of Birth	<b>COLORADO ONLY</b>			
Full Name of Father	First	Middle	Last	
Full Name of Mother Prior to 1st marriage	First	Middle	Maiden Last Name (prior to 1st marriage)	

Pursuant to Colorado Revised Statutes, 1982, 25-2-118 and as defined by Colorado Board of Health Rules and Regulations, applicant must have a direct and tangible interest in the record requested. The penalties for obtaining a record under false pretenses include a fine of not more than \$1,000.00, or imprisonment in the county jail for not more than one year or both such fine and imprisonment (CRS 25-2-118)

By signing below, I have read and understand that there are penalties for obtaining a record under false pretenses.	Today's date
Signature ►	

\*\*\*\*Enclose a copy of a current driver's license, passport, State identification or other acceptable ID.  
(See reverse side for complete list of primary and secondary ID's)

### WAYS TO ORDER

**Fax your application** - within continental USA to 1-800-423-1108  
outside continental USA to 1-303-691-9307

**Mail in application** - with check, money order, or credit card information.  
Make check or money order payable to Vital Records.  
Please do not send cash.

**Processing time** - Upon receipt of your request allow up to 30 days for your request to be processed.

### CHARGES (fees are non-refundable)

**COST OF CERTIFIED COPY:**

\$17.00 for 1<sup>st</sup> copy or search ..... \$ \_\_\_\_\_

\$10.00 for each copy of the same record ordered at the same time ..... \$ \_\_\_\_\_

\$20 expedite fee ..... \$ \_\_\_\_\_  
(processed within 15 days upon receipt of your request)

\*\*10.00 credit card convenience charge  
(Walk-in and Expedite fee excluded) ..... \$ \_\_\_\_\_

**PLEASE CHECK YOUR SHIPPING METHOD:**

\*\*\*Regular Mail (\$0.00 - no additional charge) ..... \$ \_\_\_\_\_

\*\*\*Fed Ex - within continental U.S. (\$20.00) ..... \$ \_\_\_\_\_

\*\*\*Express Mail-within continental U.S. (\$19.00) ..... \$ \_\_\_\_\_

\*\*\*UPS (credit card orders only) (\$19.00) ..... \$ \_\_\_\_\_

\*\*\*Within continental USA only

**Grant Total:** \$ \_\_\_\_\_

\*\*CREDIT CARD ORDERS mail-in, scan and email or fax request only

Card Type: Visa MasterCard Discover American Express

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

THE OFFICE OF THE STATE REGISTRAR OF VITAL STATISTICS REQUIRES THE FOLLOWING ID DOCUMENTATION

\*\*\*\*At least 1 of the following:  
(No expired documents accepted)

*PRIMARY LIST*

- Alien Registration Receipt/Permanent Resident Card
- Certificate of U.S. Citizenship
- Colorado Department of Corrections ID card
- CO Temporary Driver's License Form (with hole-punched Driver's License)
- Employment Authorization Card (I-766)
- Foreign Passport
- Photo Driver's License
- Photo ID Card (DMV)
- School, University or College ID Card (must be current)
- Temporary Resident Card
- U.S. B1/B2 Visa card with I-94
- U.S. Certificate of Naturalization
- U.S. Citizenship ID Card (I-197)
- U.S. Military ID Card
- U.S. Passport

**WE ARE SORRY, BUT WE CANNOT ACCEPT:**

- Matricula Consular Card
- Novelty ID Card
- Non-expiring Identification Cards
- City or County Prison/Jail ID
- Souvenir birth certificates
- Temporary Driver's license or Temporary State ID

\*\*\*\*Or at least 2 of the following:  
(Any document expired more than six months will not be accepted)

*SECONDARY LIST*

- Acknowledgment of Paternity document
- Birth Certificate of Applicant (U.S. only)
- Court order of adoption or name change
- Craft or trade license (Colorado only)
- DD-214
- Divorce Decree (U.S. only)
- Hospital birth worksheet (for infants under 6 months)
- Hunting or Fishing License (must be current-Colorado only)
- IRS-TIN card
- Marriage license (U.S. only)
- Medicare Card
- Merchant mariner card
- Mexican voter registration card
- Motor vehicle registration or title (U.S. only)
- Pilot license
- Selective Service Card (U.S. only)
- Social Security Card
- Social Services Card (Medicaid, WIC)
- State or federal prison or corrections card
- Tribal ID Card
- Weapon or gun permit (U.S. only)
- Work ID, Paycheck Stub (within 3 months), or W-2
- Any Expired document from the "Primary" List (cannot be expired more than 6 months)

If you cannot provide acceptable identification, it is suggested that you ask a spouse, parent, grandparent, sibling, or adult child, who can provide appropriate identification, to request the document. **\*Proof of relationship is required**, such as a birth certificate or marriage certificate.