



APPLICATION FOR CERTIFIED COPY OF: (✓)Box
(This form cannot be used to order a birth certificate)

- The Correction/Change form
- The Acknowledgment of Paternity
- A Testimonial letter

REQUESTOR INFORMATION (please print)

Name of person making request	First	Middle	Last	Suffix
Mailing Address	Address/City/State/Zip			
Email Address				Daytime Phone
*Relationship to Registrant <small>(Proof of relationship might be needed)</small>	<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, M.D. Name, Other)			

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.

Signature ▶		Date	
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***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)

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	COLORADO ONLY			
Full Name of Father	First	Middle	Last	
Full Name of Mother Prior to 1st marriage	First	Middle	Maiden Last Name (prior to 1st marriage)	

CHARGES	(Fees are non-refundable)	Quantity (#)	Fees (\$)	Total (\$)
1 st copy of record or search		x	17.00	=
each copy of the same record ordered at the same time		x	10.00	=
**credit card convenience charge (Walk-in excluded)		x	10.00	=
Expedited Shipping ▶ <i>(USA Only)</i>	<input type="checkbox"/> Express mail <input type="checkbox"/> FedEx (check or money order only) <input type="checkbox"/> UPS (credit card only)		19.00	=
Regular mail no charge				
Total number of copies requested ▶				
			Grand 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: _____

WAYS TO ORDER

Mail in application - with check, money order (payable to vital records) or credit card. (Not responsible for cash)

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

IN PERSON

ADDRESS

Email: cdphe_birthcertificates@state.co.us

Walk-in Hours:
Monday-Friday
8:00pm-5:00pm

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

Website: www.colorado.gov/cdphe

Phone: (303) 692-2226

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

- o Alien Registration Receipt/Permanent Resident Card
- o Certificate of U.S. Citizenship
- o City of Denver County Jail Inmate ID
- o Colorado Department of Corrections ID card
- o CO Temporary Driver's license (with hole-punched Driver's License)
- o Department of Human Services Youth Corrections ID
- o Employment Authorization Card (I-766)
- o Foreign Passport
- o Government Work ID
- o Job Corps ID
- o Photo Driver's license
- o Photo ID Card (DMV)
- o School, University or College ID Card (must be current)
- o Temporary Resident Card
- o U.S. B1/B2 Visa card with I-94
- o U.S. Certificate of Naturalization
- o U.S. Citizenship ID Card (I-197)
- o U.S. Military ID card
- o U.S. Passport

WE ARE SORRY, BUT WE CANNOT ACCEPT:

- o Matricula Consular Card
- o Novelty ID Card
- o Non-expiring ID cards
- o Souvenir/Hospital birth certificates
- o Temporary Driver's licenses or Temporary State ID Card

****Or at least 2 of the following:

(Any document expired more than six months will not be accepted)

SECONDARY LIST

- o Acknowledgment of Paternity document (Colorado only)
- o Birth Certificate of Applicant (U.S. only)
- o Court order of adoption or name change
- o Craft of trade license (Colorado only)
- o DD-214
- o Divorce Decree (U.S. only)
- o Hospital birth worksheet (within 6 months of birth)
- o Hunting or Fishing License (must be current-Colorado only)
- o IRS-TIN card/letter
- o Marriage license (U.S. only)
- o Medicare card
- o Merchant mariner card
- o Mexican Voter Registration card
- o Motor vehicle registration or title (must be current-U.S. only)
- o Pilot license
- o Property tax receipt (within past year)
- o Selective Service Card (U.S. only)
- o Social Security card
- o Social Services Card (Medicaid, WIC)
- o State or Federal prison or corrections ID card
- o Tribal ID card
- o Weapon or Gun Permit (U.S. only)
- o Work ID, Paycheck stub (within 3 months), or W2 (last tax year)
- o 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.