



# IDAHO VITAL RECORDS CERTIFICATE REQUEST FORM BIRTH

**!If you are requesting any type of change to the certificate, please use form Idaho Vital Records Certificate Request - Legal Action!**  
**WARNING:** False application for a certified copy of a vital record is a felony punishable by Title 39, Chapter 2, **Idaho Code.**

APPLICANT INFORMATION - ITEMS IN RED* ARE REQUIRED					
<input type="checkbox"/> MAIL ORDER TO APPLICANT ADDRESS			<input type="checkbox"/> MAIL ORDER TO OTHER NAME/ADDRESS		
APPLICANT NAME - FIRST*		APPLICANT NAME - LAST*	MAIL TO NAME - FIRST		MAIL TO NAME - LAST
APPLICANT STREET ADDRESS*			MAIL TO STREET ADDRESS		
APPLICANT CITY*	APPLICANT STATE*	APPLICANT ZIP CODE*	MAIL TO CITY		MAIL TO STATE
APPLICANT DAYTIME CONTACT PHONE NUMBER*			APPLICANT EMAIL ADDRESS*		

**Sign this request. Include a copy of both sides of applicant's picture ID with your payment. (See page 2 for ID information)**

**APPLICANT SIGNATURE\*:** ~~X~~ \_\_\_\_\_

CERTIFICATE INFORMATION (Available from 1911)		
Number of ____ Certified Copies (computer generated)	Number of ____ Certified Photocopies (exact image)	
DATE OF BIRTH	CITY OF BIRTH IN IDAHO	STATE OF BIRTH <b>IDAHO</b>
FIRST NAME ON CERTIFICATE	MIDDLE NAME ON CERTIFICATE	LAST NAME ON CERTIFICATE

<input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER			
FIRST NAME	MIDDLE NAME	LAST NAME	LAST NAME AT BIRTH
<input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER			
FIRST NAME	MIDDLE NAME	LAST NAME	LAST NAME AT BIRTH

APPLICANT'S RELATIONSHIP TO THE PERSON NAMED ON THE CERTIFICATE (CHOOSE ONE)
DOCUMENTARY PROOF OF RELATIONSHIP <b>MAY</b> BE REQUIRED FOR THE FOLLOWING:
<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Current Spouse <input type="checkbox"/> Brother/Sister <input type="checkbox"/> Grandchild <input type="checkbox"/> Maternal Grandparent <input type="checkbox"/> Paternal Grandparent
DOCUMENTARY PROOF OF RELATIONSHIP <b>WILL</b> BE REQUIRED FOR THE FOLLOWING: - Include with order
<input type="checkbox"/> Attorney <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Government Agency <input type="checkbox"/> Other (Specify):

PURPOSE FOR ORDERING THE CERTIFICATE (CHOOSE ONE)
<input type="checkbox"/> ID/Passport <input type="checkbox"/> Personal Records/Use <input type="checkbox"/> School/Sports <input type="checkbox"/> Legal Purposes <input type="checkbox"/> Insurance/Benefits <input type="checkbox"/> Family History
<input type="checkbox"/> Estate Settlement <input type="checkbox"/> Pending Adoption <input type="checkbox"/> Other (Specify):

ORDER TOTALS	
Total number of certificates ordered: ____ at \$16.00* each	\$
Need RUSH service? <input type="checkbox"/> YES if checked, enclose additional \$10.00* and write RUSH on envelope	\$
<b>TOTAL AMOUNT DUE</b>	<b>\$</b>

Mail completed form and payment to:  
 IDAHO VITAL RECORDS, PO BOX 83720, BOISE, ID 83720-0036  
 For questions see our website or email IVR@dhw.idaho.gov



# IDAHO VITAL RECORDS CERTIFICATE REQUEST INFORMATION

## BIRTH

**PLEASE READ THIS INFORMATION CAREFULLY. FAILURE TO DO SO COULD CAUSE A SIGNIFICANT DELAY IN PROCESSING.**

A letter will be sent if the certificate you order cannot be located. The \$16.00 search fee will not be refunded per IDAPA 16.02.08 251 02.

Complete this request form and mail it to: IDAHO VITAL RECORDS, PO BOX 83720, BOISE, ID 83720-0036. Remember to sign your request. Enclose the correct fees and a copy of *both sides* of your signed picture ID.

To order online through VitalChek, please see our website at [healthandwelfare.idaho.gov/vitalrecords](http://healthandwelfare.idaho.gov/vitalrecords). *Additional charges will apply.* All credit card orders are processed through VitalChek.

### APPROVED IDENTIFICATION LIST

Current Government Issued Picture Identification with a Signature	OR Two Forms of CURRENT ID - One MUST have a Signature	OR
<ul style="list-style-type: none"> <li>• Driver's License</li> <li>• State ID card</li> <li>• Passport</li> <li>• Tribal ID card</li> <li>• Concealed Weapons Permit</li> <li>• Prison ID card</li> </ul>	<ul style="list-style-type: none"> <li>• Social Security Card with signature</li> <li>• Work ID card with picture or signature</li> <li>• Auto registration with signature</li> <li>• Traffic ticket with signature</li> <li>• Court record with signature</li> <li>• College/School ID with picture</li> </ul>	<ul style="list-style-type: none"> <li>• Matricula card with signature</li> <li>• Insurance record</li> <li>• Auto insurance</li> <li>• Driver Permit</li> <li>• Pay stub</li> <li>• Hunting/Fishing license</li> <li>• Passport card</li> </ul>
		<ul style="list-style-type: none"> <li>• Notarized signature on the request (see below)</li> <li>• Have an immediate family member (that has current ID from the approved list) request it for you (Please note: proof of relationship may be required)</li> </ul>

**If you are unable to provide any of the above approved identification, take this completed form to a Notary Public to complete and sign below:**

This instrument was signed or acknowledged before me in the County of \_\_\_\_\_, State of \_\_\_\_\_ on \_\_\_\_\_ Date  
 by \_\_\_\_\_,  
Printed name of applicant below

Whose identity is either personally known to me or was proven to me through acceptable documentary evidence to be signer below; and they acknowledge to me that they executed this signature for purpose of obtaining a certificate from the Idaho Bureau of Vital Records and Health Statistics.

Applicant Signature:		Notary Stamp/Seal
Notary Signature:		
Residing at:		
My commission expires:		

### CERTIFICATE FEES

**\$16.00** for each certified copy or search for a vital record. A Certified Copy is computer generated and is valid for most legal purposes. A Certified Photocopy is an exact image of the record on file in our office, and is valid for most legal purposes.

### RUSH FEES

**\$10.00** one-time charge to RUSH this order. Write **RUSH** on the outside of your envelope.

### SHIPPING

There is no shipping charge for regular mail delivery via US mail. If you need faster shipping or order tracking, order online through [vitalchek.com](http://vitalchek.com). *Additional charges will apply.* Certificates cannot be sent via email or fax.

### PROCESSING TIMES

For current processing times, visit [healthandwelfare.idaho.gov/vitalrecords](http://healthandwelfare.idaho.gov/vitalrecords). Most orders take 1-3 weeks to complete once received in our office. Most RUSH orders take 5-7 days once received in our office. **Current workload, staffing levels, missing or incomplete application information, or unresolved legal issues affecting certificates may impact actual processing times.**

### SPECIAL HANDLING FEE FOR APOSTILLE

If you want us to send your certificate and completed apostille application to the Idaho Secretary of State, please visit [healthandwelfare.idaho.gov/vitalrecords](http://healthandwelfare.idaho.gov/vitalrecords) or call 208-334-5980 for instructions **BEFORE** sending the **\$10.00** special handling fee.

Make your SIGNED check or money order payable to **Idaho Vital Records**. All Vital Records fees may be combined and paid with ONE check or money order. **Please check your total carefully! Overpayments of less than \$10.00 are not refunded unless requested in writing.**