

APPLICATION FOR A CERTIFIED COPY— MICHIGAN AFFIDAVIT OF PARENTAGE RECORD

Michigan Department of Health and Human Services

PART 1 – APPLICANT INFORMATION (PERSON FILLING OUT THIS FORM)

Applicant's
First Name _____ Middle _____ Last _____

Mailing
Address _____ City _____ State _____ Zip _____

Daytime Phone w/ area code *Required _____ Email _____

PART 2 – RELATIONSHIP / INDICATE WHOSE AFFIDAVIT RECORD YOU ARE REQUESTING PER MCL 333.2882

- Myself
- My Child
- I am the Legal Guardian, Custodial Party, or Power of Attorney (Copy of Court Order / Legal Documentation Required)
- My Client (Licensed attorney must provide letter of representation with client name and State Bar # on official letterhead, along with ID for both attorney and client. We do NOT accept delegations of authority or information releases.)
- Heir of the Deceased (If not a Michigan death, must provide COPY of death certificate)
- Relationship to decedent _____ • State where death occurred _____
 - Decedent's name at time of death _____ • Year of death _____
- Court of Competent Jurisdiction (Court Order & Fee Required)

PART 3 – INFORMATION TO LOCATE AFFIDAVIT OF PARENTAGE RECORD ON FILE

Child's First Name at Birth _____ Middle _____ Last _____

Child's Date of Birth (mm/dd/year) ____/____/____ Child's County of Birth _____

Parent/Mother's Name _____ Mother's Date of Birth (mm/dd/year) ____/____/____

Parent/Father's Name _____ Father's Date of Birth (mm/dd/year) ____/____/____

Did the name of the Applicant or the Person (Child) on the record change **due to Marriage**? Yes No

If yes, Place of Marriage (State) _____ Date of Marriage (mm/dd/year) ____/____/____

First _____ Middle _____ Last _____

Did the Applicant or the Person (Child) on the record have a **Court Ordered Legal Name Change**? Yes No

If yes, Court Order Required First _____ Middle _____ Last _____

PART 4 – PURPOSE OF REQUEST

PART 5 – APPLICANT SIGNATURE (PERSON FILLING OUT THIS FORM)

By signing, I understand I am agreeing to pay for a search of State of Michigan Vital Records. This does not guarantee that a record will be found. Falsifying an application for a vital record and/or assuming the identity of another person is subject to criminal penalties. Per MCL 333.2894(b) and 445.65.

Your Signature:

(Must be original in ink, by hand) _____ Date: _____

REQUESTING A MICHIGAN AFFIDAVIT OF PARENTAGE RECORD

The Michigan Vital Records Office has Affidavit of Parentage records that were **filed** with the state's Central Paternity Registry since **June 1, 1997**. If you need an Affidavit of Parentage record that was filed **prior** to June 1, 1997, please contact the Probate Court in the county where the mother resided at the time of signing, or the Probate Court in the county where the child was born. Affidavit of Parentage records are restricted documents, available only to those individuals named in Part 2.

PAYMENT AND COPY OF VALID IDENTIFICATION REQUIRED (SEE NEXT PAGE FOR DETAILS)

APPLICANT IDENTIFICATION REQUIREMENTS (SEND PHOTOCOPIES; ORIGINALS WILL NOT BE RETURNED)

TIER 1

One piece of documentation that establishes identity by itself.

- U.S. or Foreign Passport
- U.S. Passport Card
- U.S. or U.S. Territories Driver's License or Identification Card
- U.S. Military Identification Card with **both** picture and signature
- Other U.S. or U.S. Territories issued document that meets the following criteria: **Document must be unexpired, contain a photograph and at least the following information: name, date of birth, date of expiration, signature, and address.**

-OR- TIER 2

Must include all documentation listed in one of the following categories.

- Any of the documents in Tier 1 that expired within the past 5 years and any one document from Tier 3 issued within the past year
- Employment identification with photo, accompanied with a pay stub or W2 form issued within the past year
- Student identification with photo, accompanied by a current report card or other proof of current school enrollment. Both documents must be for the same institution.
- Department of Corrections photo identification card accompanied by probation or discharge papers issued within the past year
- If an inmate is currently incarcerated: a Department of Corrections photo identification card accompanied by a verification of incarceration on facility letterhead issued within the past year

-OR- TIER 3

Must include at least three (3) alternative documents from different sources from the list below; One must have been issued within the past year.

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| <ul style="list-style-type: none"> ● Any of the documents in Tier 1 expired more than 5 years ● Social Security Card (must be signed) ● Doctor/hospital/dentist bill ● Health insurance card ● Utility bill ● Voter registration ● Paycheck stub ● Bank statement ● Marriage or Divorce certificate ● Your child's Birth certificate | <ul style="list-style-type: none"> ● Motor vehicle registration ● IRS form W-2 ● Baptismal certificate ● Military DD-214 discharge paper or equivalent ● School records ● Letter or benefit statement from a government agency ● Land or rental agreement ● Military ID with either a picture or signature. ● Other documents that establish identity to a degree equivalent to those listed in this tier |
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PART 6 – PAYMENT

Application Fee includes one Certified Copy or a No-Find Letter

Base Fee (Includes one year search)		\$34.00	\$
Additional Years to Search (If exact year is unknown)	Specify Years _____	\$12.00 per year	\$
Additional Certified Copies	Specify Quantity _____	\$16.00 each	\$
Expedited "Rush" Processing	Reduces in-office time. (Does not affect mail time to/from our office)	\$12.00 additional	\$
CHECK or MONEY ORDER made out to the "State of Michigan" (Request will not be processed if payment is not included in envelope)		Total Amount Enclosed	\$

PROCESSING TIMES FOR MAILED REQUESTS

REGULAR SEARCH

Approximately 4 to 6 weeks of in-office processing time, depending on volume of requests received. Then sent via regular mail.

EXPEDITED "RUSH" SEARCH

Approximately 2 to 3 weeks of in-office processing time, depending on volume of requests received. Then sent via regular mail.

ADDITIONAL INFORMATION: Results are sent USPS First Class Mail, Pre-Paid envelopes will NOT be accepted

If you find that the above processing times do not meet your needs, please visit www.michigan.gov/vitalrecords or call our Eligibility Unit at **517-335-8666** to speak with a customer service representative about available options.

MAIL APPLICATION (WITH PAYMENT AND REQUIRED DOCUMENTATION)

<p>REGULAR MAIL TO: Vital Records Requests P.O. Box 30721 Lansing MI 48909</p>	<p>RUSH MAIL TO: Vital Records RUSH P.O. Box 30721 Lansing MI 48909</p>
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