

APPLICATION FOR A CERTIFIED COPY— MICHIGAN BIRTH 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 BIRTH RECORD YOU ARE REQUESTING

PER MCL 333.2882

- Myself
 My Child (If adopted, only adoptive parents are eligible)
 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 _____
 Birth Record is at least 100 years old (no ID required) Court of Competent Jurisdiction (Court Order & Fee Required)

PART 3 – BIRTH INFORMATION (TO LOCATE BIRTH RECORD ON FILE)

First Name at Birth _____ Middle _____ Last _____
Date of Birth (mm/dd/year) ____/____/____ Place of Birth (City/County, State) _____
Birth Parent/Mother's Name _____ Birth Parent/Father's Name _____
Is the person named on the record Adopted? Yes No Gender Male Female X

If yes, Name AFTER Adoption First _____ Middle _____ Last _____
Adoptive Parent/Mother's Name _____ Adoptive Parent/Father's Name _____

Did the name of the Applicant or the Person (Child) on the birth 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 birth 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: _____

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	Age 64 and under	\$34.00	\$
OR Senior Citizen Requesting own birth record	Age 65+ (Does not apply to heir or guardian requests)	\$14.00	\$
Additional Years to Search (If exact birth 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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