

Instructions to Complete the Request for Birth Certificate

1. <u>Indicate whether you are requesting a Certified Copy or a Certified Informational Copy.</u>

Only individuals who are authorized by Health and Safety Code §103526 can obtain a *Certified Copy* of a birth record. Section C on page 1 of the application identifies the individuals who are authorized to receive a *Certified Copy*. All others may receive a *Certified Informational Copy* that will be marked "Informational, Not a Valid Document to Establish Identity."

Both documents are certified reproductions of the original document on file with our office. With the exception of the legend, redaction of signatures and Social Security Number, the documents contain the same information.

2. Section A

In this section, please provide the information about the child. If the information furnished is incomplete or inaccurate, we may not be able to locate the record.

The "Birth" name required on Vital Records is the name given at birth, or a name received through adoption, court-order name change, or Naturalization. AKAs (Also Known As) and assumed names cannot be entered as the legal "Birth" name.

3. Section B

In this section, please provide **your** information, the number of copies requested and the amount enclosed. The fee is \$32.00 for each copy requested.

Third-Party

Make the check or money order payable to: County of Riverside

- No third-party checks or money orders are accepted
- Checks must have pre-printed name and address of checking account owner

State law requires a **charge for record searches**. If no record is found, pursuant to Health and Safety Code §103650, the fee for one certificate will be retained for searching and a *Certificate of No Record* will be issued. If requesting multiple copies on the application, the balance will be refunded to the applicant by our Fiscal Department after the search fee is retained.

- 4. <u>Section C</u>: Skip this section if you are requesting a *Certified Informational Copy*. Establish your relationship to the person listed on the certificate by marking only one (1) box in this section.
- 5. <u>Section D</u>: Skip this section if you are requesting a *Certified Informational Copy*. Section D has two parts.
- Sworn Statement: Everyone requesting a Certified Copy must complete the Sworn Statement. The applicant requesting the Certified Copy must sign the Sworn Statement declaring under penalty of perjury that he/she is eligible to receive the Certified Copy of the birth record. The applicant must print his or her name, print the name of the child, and identify his/her relationship to the child. The relationship MUST match the information in Section C, page 1. Sign the Sworn Statement in the presence of a Notary Public or an employee of the Office of Vital Records.
- * Certificate of Acknowledgment: The Certificate of Acknowledgment is to be completed by a Notary Public. <u>Law enforcement</u> and local and state government agencies are exempt from the notary requirement.
 - 6. Mail completed application to:

Office of Vital Records P.O. Box 7600 Riverside, CA 92513-7600

MAIL APPLICATION FOR CERTIFIED COPY and CERTIFIED INFORMATIONAL COPY OF BIRTH RECORD

Be advised, we charge even if no record is found. Pursuant to H&S Code §103650 if no record is found, a fee equal to the cost for one certificate will be retained for searching and a "Certificate of No Record" will be issued.				(Office Use Only) Date Received	
Only 2023 and 2024 records are available from our office.			LRN:		
Please indicate the type of record you are requesting			COU	NDMENT NT: 0 1 2 3	
☐ I would like a Certified Copy. <u>\$32.00 per copy</u>		☐ I would like a Certified Informational Copy . \$32.00 per copy			
Complete Sections A, B, & C, then complete D in the		Complete only Sections A & B. (skip Sections C & D)			
presence of a Notary Public Only specific people are eligible to receive this record. This		No Sworn Statement and No Notary Required Everyone is eligible to request this record.			
document will establish the identity of the registrant. Refer to Section C to see if you are eligible. If not, you must request a Certified Informational Copy.		This document will be printed with a legend on the face of the document that states: "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY."			
Section A: BIRTH CERTIFICATE INFORMATION Complete the information below as shown on the birth The more information you provide, the easier it is for u	record to the	nt or type) e best of your ability.			
FIRST NAME of Child	MIDDLE N	IIDDLE NAME of Child		LAST NAME of Child	
Date of Birth	City of Birtl	h	Hospital of Birth		
Mother/Parent FIRST name	MIDDLE name		LAST name (Birth Name)		
Father/Parent FIRST name	MIDDLE na	ame	LAST name (Birth Name)		
Section B: Your Information: "Applicant" (please					
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Your First Name Your Middle N	ıame	You	Last Nan	ne	
Your mailing information:	Make chec	ck or money orders payable	State la	w requires a charge for	
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Section D: SWORN STATEMENT AND CERTIFICATE OF ACKNOWLEDGMENT

SWORN STATEMENT , declare under penalty of perjury under the laws of the State of California, that I am an authorized person, as defined in California Health and Safety Code §103526 (c), and am eligible to receive a certified copy of the birth record of the following individual: Name of Person Listed on the Certificate:_ (this is the name of the child) Your Relationship to the Person named above: (this must match the relationship indicated in Section C on page 1) ******The remaining information must be completed in the presence of a Notary Public or Office of Vital Records staff.****** Subscribed to this (Your Signature) If submitting your order by mail, you must have your Sworn Statement notarized using the Certificate of Acknowledgment below. The Certificate of Acknowledgment is compliant with California law (Civil Code §1189) and must be completed by a Notary Public. If you are not in California, please strike out California and insert the appropriate state. Law Enforcement and local and state government agencies are exempt from the notary requirement. CERTIFICATE OF ACKNOWLEDGEMENT A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document. State of California County of _____ before me, ____personally appeared (here insert name and title of the officer) , who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

SIGNATURE

WITNESS my hand and official seal.

(SEAL)