

http://www.tchd.org Email:vitalrecords@tchd.org Tel:(720) 200-1401

## **Tri-County Health Department**

Office of Vital Records 6162 S. Willow Drive, Suite 100 Greenwood Village, CO 80111 Office of Vital Records 4201 E. 72nd Ave., Suite D Commerce City, CO 80022

Staff Use Only:		V-10 03/17
DCN:		
Staff:	Date:	

## Application for Certified Copy of Birth Certificate

		ioatic	)			d Copy of	<u> </u>	<u> </u>	tilloate		
Requestor Information about the p		uesting the	e birth certifica	ate – plea:	se p	rint.					
Print name of person making request:							Daytime Phone:				
Mailing Address:											
, and the second											
Physical Address:  If same as above	City State			State Z	<u>Zip</u>						
Your relationship to person	named on o	certificate (P	roof needed if	your nam	ie is	not listed on certifica	ate):				
☐ Self ☐ Parent ☐ Grand	dparent 🗖	Step-Parent	∃ Sibling □	Spouse $\square$	<b>)</b> Chi	ild 🗖 Legal Guardian 🛭	⊒ Legal	Representative	Other		
Reason for Request:											
☐ Newborn ☐ Travel/Pass	port □Red	cords □Sch	iool 🗆 Insurance	e 🛭 Socia	l Ser	rvices 🗖 Employment	☐ Socia	al Security 🚨 C	other:		
Registrant Inforr	nation										
Information about the p		ose birth ce	ertificate is be	ing reque	sted				1		
Full Name at Birth	First					Middle			Last		
Date of Birth	Month	Day	Year	Sex □ Fema	ıle	Is this Person Dece	ased?	□ Yes □	No. If ves. date:	/ /	
				☐ Male	-	State where Death Occurred: (Please provide certified copy of death					
	City				Cou			death certificate) State			
Place of Birth	J,	County				Colorado ONLY					
Full "MAIDEN" Name of Mother	First			Mide	dle	<u>Maiden</u> La	Maiden Last Name (name prior to first marriage)				
Full Name of Father	First				Mide	dle	Last	Last			
1 00101											
Pursuant to Colorado Revised S The penalties for obtaining a rec 25-2-118)											
By signing in this box, I	have read	and unde	rstood that the	ere are per	nalti	es for obtaining a rec	ord un	der false prete	enses.	Today's Date	
x											
								<u> </u>			
Alien Registration Receipt of the second secon		•	Job Corp		nal ID	Ooptions					
Card (INS I-151 or I-551)  Certificate of US Citizenship (N-560-561)				Photo Driver License Photo ID card (DMV)				<u>Customer Order</u>			
City of Denver/Denver County Jail Temporary Inmate ID			ID • School, I	School, University, or College ID Card (current school							
				year)  Temporary Resident Card (I-688, I-688A, or I-688B)				Number of certified copies			
			000.72	US B1/B2 Visa Card PLUS I-94 US Certificate of Naturalization N-550/570							
Foreign Passport     U			US Citize	US Citizenship ID Card (I-197)					Cost of first ce	ertificate \$ <u>17.75</u>	
Government Work ID			US Milita     US Pass	ary Identifica sport	ition (	Card					
*For payment by fax or mail, enter card info below or make checks/money orders payable to TCHD*					Additional certificate(s) \$10.00 \$(of same record ordered at same time)						
Card Type:	′isa 🗌 M	lasterCard	Discover	AMEX				(or same i	ecord ordered at	same time)	
Cardholder name:							FedEx \$25.00 – 2 day (optional) \$				
Cardholder Signature: _											
Card Number:								Total	charges \$		
Francisco Data	,							I			