San Joaquin County Public Health Services Mail Application for Certified Copy of Birth Certificate

Effective July 1, 2003 California law permits only authorized individuals to receive authorized certified copies of birth records required to establish identity and related uses such as obtaining a driver's license, passport, or insurance coverage. If you are requesting an authorized certified copy, complete all application sections and submit it with a notarized statement as described in section 4.

An informational certified copy may be obtained by any person but cannot be used to establish formal identity. If you are requesting an informational certified copy, complete sections 1 and 2 only and submit the application. A notarized statement is not required for an informational only copy.

The health department furnishes certified copies for births that were registered during the current and past calendar year only.

Submit this application form with the appropriate fees to:
Public Health Services – Vital Records Unit
PO Box 2009 Stockton, CA 95201-2009

Permanent records are kept at the County Recorder's Office at:

6 S. El Dorado St. 2nd floor Stockton Ca. 95201

www.sigov.org/Recorder/Vital.htm

Certificate Type Requested: Authorized	Certified CopyInfor	mational Only	
Number of Certificates Requested			
1. Newborn/Registrant Information			
Name	Birth Dat	te//	
Multiple Births – Additional Newborns (twins/triplets)			
Name	 		
Name	<u>.</u>		
Place of Birth Mother's Maiden Name			
2. Requestor Information			
Name			
Mail Address			
Number and Street	City	State Zip Code	
3. Authorized Individual Information – Complete this section if requesting authorized			
certified copy. Specify which category of authorized individual you are:			
A parent, legal guardian, grandparent, or sibling of the registrant.			
☐ A party entitled to receive the record as a result of a court order; an attorney or a licensed adoption agency seeking the birth record to comply with Section 3140 or 7603 of the Family Code.			
 ☐ A member of a law enforcement agency or representative of another governmental agency, as provided by law, who is conducting official business. ☐ An attorney representing the registrant or registrant's estate; a person or agency empowered by statute or appointed by a court to act on behalf of the registrant or his/her estate. 			

4. Notarized Statement – A written request for an authorized certified copy must be accompanied by a notarized statement sworn under penalty of perjury that the requester is an authorized person, as required by State law. Your application will be returned if the required statement below is not signed and notarized. This section is not required for an informational only copy. Sworn Statement: I,		
registrant(s) as specified in Section 3 of this application, in conformance with section 103526(c) of the California Health and Safety Code.		
Sworn this day of, 200, at,, Day Month Year City State		
Signature		
Certificate of Acknowledgement		
State of County of		
On, before me personally appeared,		
personally known to me, orproved to me on the basis of satisfactory evidence,		
to be the person whose name is subscribed to the above instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.		
(NOTARY SEAL) Notary Signature		
Fees – Fees for certificate copies are established by State law. Include a check or money order payable to San Joaquin County Public Health Services. The current fee is \$14.00 per copy.		