

Colorado Birth Certificate Request

Colorado Department of Public Health and Environment

Apply in person for same-day services Walk-in Hours: Monday-Friday 8:30 – 4:30 Correction Hours: Monday-Friday 8:30 – 3:30 Cheyenne County Public Health hours: 8:00 - 4:00

560 W 6 N. Cheyenne Wells, CO 80810

719-767-5616, Fax: 719-767-8747

Vital Records Section HSVR-VR-A1 4300 Cherry Creek Drive South Denver, CO 80246-1530 www.colorado.gov/cdphe/vitalrecords Email: vital.records@state.co.us Phone: (303) 692-2200 Phone Orders: 1-866-300-8540 Online Orders: www.vitalchek.com Phone/Online Follow-Up: 1-866-632-2604 Fax Orders: 1-800-423-1108

Colorado has birth records for the entire state since 1910. Birth certificates are also available from the county office(s); for all county locations visit http://www.colorado.gov/cdphe/vitalrecords



Requirements: Please check all that apply...

This request must be completed in full.

Enclose a copy of a current driver's license, passport or State identification. (See reverse side for complete list for primary and secondary ID's)

. Enclose appropriate fees

Person requesting to receive a birth certificate must sign below.

Proof of Relationship is required (Parents and Registrant excluded)

Enclose a copy of the death certificate if the person is deceased.

Requestor Information

Print name of person F making request	irst	rst Middle			Last			Email:			
Mailing Address	Apt# City			City	State			Zip	Daytime Phone		
Physical Address Apt# City					State		Zip	Alt Phone Nu	mber		
Relationship to Reg			Self			Grandpa		Step-pare		Ę	Spouse
(person named on certifi reverse side	cate)*se		Chil		Stepchild	Legal gu	ardian L	Legal repr	esentative		
Reason for Reques	t: 🗋 N	ewbo	rn 🖵	Travel/Pa	assport 📮 Reco	ords 🖵	School	🖵 Insura	ance 🖵 Other:		
Registrant Infor	matio	-		1	n whose birth certificate adoptive information ar	0	1	21 1	nt		
Full Name at Birth	First				Middle Last						
Date of Birth	Month	Day	Year		Is this Person Dec	eased?		No <i>Ist provide a copy of the death certificate</i>			
Place of Birth	City				County			State Colorado ONLY			
Full Name of Father	First				Middle			Last			
Full Name of Mother	First				Middle			Maiden Last Name (name prior to first marriage)			
Pursuant to Colorado Revi in the record requested. Th than one year or both such	e penaltie	s for ob	aining a 1	ecord under	false pretenses include			0 / 11			0
By signing below, I h					-	s for obta	ining a r	ecord under	false pretenses.	Today'	s date
Ways to Order: ^{Cheyenr}	e County	Public I	Health (ch	eck or cash	only) C	harges:					
**Order certificates online at www.colorado.gov/cdphe/vitalrecords Certificate(s) mailed 3-5 days after receipt of all required documentation.							Cost of certificates: \$17.75 for one (or search when no record found)				
**Fax your application with credit card information: within continental U.S. fax 1-800-423-1108; outside continental U.S. fax 1-303-691-9307. Certificate(s) mailed							\$10.00 for each additional certificate of same record ordered at same time				
at the end of five business days upon receipt of all required documentation. Mail in application with check, money order, or credit card information. Make check or money order payable to Vital Records. Please do not send cash.							\$10.00 credit card convenience charge (walk-ins excluded).			Not available at local office	
Certificate(s) mailed within	n three we	eks upo	n receipt	of all require	d documentation		\$35 for ea	ch heirloom ce	rtificate		Not available a
**Credit card orders:		_			Please check your shipping method:						
Card Type: 🔲 VISA 🔲 MasterCard 🔲 Discover 🔲 American E>							FedEx* (check, money order, cash orders ONLY) (\$20.00)				
Cardholder name: Card Number:								ss Mail* (\$19.95) (credit card orders	ONLY)(\$19.00)		
Expiration Date:	/								UNET)(\$19.00)		
** \$10.00 convenience charge to be added								n continental U.S.			

*Certified birth certificates may be issued to:

Please note that proof of relationship is required if your name is not listed on the birth certificate: (e.g. marriage certificates, birth certificates, court orders)

The registrant (person named on the certificate) Parents Grandparents Great grandparents Grandchild Stepparents Siblings

Spouse Adult children Legal guardian Legal representatives of any of the above must present proof of client relationship For complete list visit: http://www.colorado.gov/cdphe/vitalrecords

The Office of the State Registrar ov Vital Statistics requires the following documentation:

At least 1 of the following: (No expired documents accepted)

'Primary' List:

- Alien Registration Receipt/Permanent
- Resident Card
- Certificate of U.S. Citizenship
- City of Denver County Jail Inmate ID
- Colorado Department of Corrections ID card
- CO Temporary Driver's License (with hole-punched Driver's License)
- Department of Human Services Youth Corrections ID
- Employment Authorization Card (I-766)
- Foreign Passport
- Government Work ID
- Job Corps ID
- Photo Driver's License
- Photo ID Card (DMV)
- School, University or College ID Card (must be current)
- Temporary Resident Card
- U.S. B1/B2 Visa card with I-94
- U.S. Certificate of Naturalization
- U.S. Citizenship ID Card (I-197)
- U.S. Military ID Card
- U.S. Passport

Or at least 2 of the following: (Any document expired more than six months will not be accepted)

'Secondary' List:

- Acknowledgment of Paternity document (Colorado only)
- Birth Certificate of Applicant (U.S. only)
- Court order of adoption or name change
- Craft or trade license (Colorado only)
- DD-214
- Divorce Decree (U.S. only)
- Hospital birth worksheet (ID for mothers- within 6 months of event)
- Hunting or Fishing License (must be current-Colorado only)
- IRS-TIN card
- Marriage license (U.S. only)
- Medicare Card
- Merchant mariner card
- Mexican voter registration card
- Motor vehicle registration or title (must be current -U.S. only)
- Pilot license
- Selective Service Card (U.S. only)
- Social Security Card
- Social Services Card (Medicaid, WIC)
- State or Federal Prison or Corrections Card
- Tribal ID Card
- Weapon or gun permit (U.S. only)
- Work ID, Paycheck Stub (within 3 months), or W-2 (last tax year)
- Any Expired document from the "Primary" List (cannot be expired more than 6 months)

- Non-expiring Identification Cards
- City or County Prison/Jail ID
- Souvenir Birth Certificates
- Temporary Driver's Licenses or Temporary State ID Card

If you cannot provide acceptable identification, it is suggested that you ask a spouse, parent, grandparent, sibling, or adult child, who can provide appropriate identification, to request the certificate. Proof of relationship is required, such as a birth certificate or marriage certificate.

*****OPTION AVAILABLE FOR ADOPTIONS*****

Only an adoptive parent or adopted person is eligible for this special service. ONLY sign below if you wish the statement "ISSUED PURSUANT TO ADOPTION" to appear on the birth certificate which indicates this person is adopted.



Signature of: adopted person adoptive parent Relationship to registrant (chek one 🗸)

Number of copies to be issued with "Issued pursuant to adoption" requested:

- We are sorry, but we cannot accept:
- Matricula Consular Card
- Novelty ID Card