

OVERS Registration Application - Instructions

This form is available on the Center for Health Statistics Web site at:

<http://public.health.oregon.gov/BirthDeathCertificates/RegisterVitalRecords/overs/Pages/NewUsers.aspx>

Use this form to request an Oregon Vital Events Registration System (OVERS) account and gain permission to electronically register death certificates, birth certificates, or fetal death records.

If you are a non-signer (Funeral home specialists, birth hearing screeners, data entry staff): Fax or email the following documents: **1)** OVERS registration application (Fill out the top portion of this form completely), **2) two pieces of identification** (one piece of identification MUST include a photo), **3)** a letter from your supervisor granting you permission to access the records associated with your facility. A Center for Health Statistics employee will notify you by email when your account is created.

If you are a signer* (Birth certifiers, midwives, funeral directors, medical certifiers, Medical Examiners): Fax or email the following: **1)** OVERS registration application (Fill out the top portion of this form completely, including your professional license number (if applicable) and check the box next to your role for using OVERS), **2)** (*Birth clerks and funeral directors only*) - a letter from your supervisor granting you permission to access the records associated with your facility.

A Center for Health Statistics employee will notify you by email when your account is created. You will enroll your fingerprint template at the nearest County Vital Records office or your designated hospital facility OVERS administrator. To register your fingerprints, you must show this form, two pieces of identification and your license number, if applicable. Once your fingerprint template is created, you will be able to sign vital records from any computer as long as you have installed a biometric device (provided to you free of charge by the Center for Health Statistics).

**In order to sign (or certify) vital records in Oregon, you must have a valid Oregon professional license or have a position as birth certificate staff in a hospital or licensed birth facility.*

List of Acceptable Identification:

- | | |
|---|---|
| 1. U.S. Passport | 10. Certificate of U.S. Citizenship (INS Form N-550 or N-561) |
| 2. Drivers License or ID Card issued by state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address | 11. Certificate of Naturalization (INS For N-550 or N-570) |
| 3. ID Card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color and address | 12. Permanent Resident Card or Alien Registration Card with Photograph (INS Form I-151 or I-551) |
| 4. Certified Copy of a Birth Certificate issued by State, County, Municipal authority or outlying possession of the United States bearing official seal | 13. Temporary Resident Card (INS Form I-688) |
| 5. U.S. Military Card or Draft Record | 14. Employment Authorization Card (INS Form I-688A) |
| 6. Native American Tribal Document | 15. Reentry Permit (INS Form I-327) |
| 7. U.S. Coast Guard Merchant Mariner Card | 16. Refugee Travel Document (INS Form I-571) |
| 8. Military Dependant's ID Card | 17. Employment Authorization Document issued by the INS which contains a photograph (INS Form-688B) |
| 9. Medical or Hospital Identification Card | 18. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350) |
| | 19. U.S. Citizen ID Card (INS Form I-197) |
| | 20. ID Card for use of Resident Citizen on the United States (INS Form I-179) |
| | 21. Employment Authorization Document issued by the INS (other than those listed) |

Social Security Cards are not a valid form of identification

OVERS Registration Application

Send completed OVERS enrollment form to:

FAX: 971-673-1201

Name: _____

(First)

(M.I.)

(Last)

Professional Title: MD DO ND PA NP CNM LDM

Professional License Number (*Oregon Licenses only*): _____

Facility Name: _____

Work Phone: _____ Fax: _____ Work Email: _____

Facility Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Facility Mailing Address (if different): _____

City: _____ County: _____ State: _____ Zip Code: _____

I attest that the above information is true and correct to the best of my knowledge.

Signature of Participant: _____ Date: _____

Below, check the box next to your User Type/OVERS Role. (* Indicates signing authority)

DEATH REGISTRATION

Funeral Home User: Funeral Director* Funeral Home Staff
Medical Certifier: Medical Certifier* Medical Certifier Staff Facility Administrator
Medical Examiner: Medical Examiner* Medical Examiner Staff

BIRTH REGISTRATION

Birth User Type: Birth Certificate Clerk* Birth Clerk Assistant Hearing Screener

Midwife* *If midwife, licensed in Oregon?* Yes No

(Midwives not licensed in Oregon must register with the Center for Health Statistics before receiving an OVERS account.)

Birth Clerk Work Schedule: What Days? M T W Th F S Su What hours? _____

Manager's Name: _____ **Manager's Phone:** _____

COUNTY STAFF

County User Type: County Registrar Deputy Registrar

CHS USE ONLY

State Official: _____ Date Account Created: _____ Username:

COUNTY OR CHS USE ONLY

Two Types of Identification Shown: **Photo ID)** _____ and) _____

Date fingerprints registered: _____

(County officials: read and sign) I have reviewed the identification documents of the above-named participant and they appear to be genuine. To the best of my knowledge, the participant named above is eligible to sign or certify vital records in Oregon.

Signature of County or State Official: _____ Print Name: _____

County Officials - Fax this form to the State office after fingerprint enrollment is complete.

Info. Complete Setup in OVERS Checked CHS Database Added to Listserve Sent email Add to CHS email

Where To Enroll Your Fingerprints

B

Baker Co. Health Dept.
3330 Pocahontas Rd.
Baker City, OR 97814
(541) 523-8211

Benton Co. Health Dept.
Vital Records Section
530 NW 27th Street
Corvallis, OR 97330
(541) 766-6835

C

Clackamas Co. Health Services
Vital Records Section
2051 Kaen Rd.
Oregon City, OR 97045
(503) 655-8406

Clatsop Co. HHS
820 Exchange St., Ste. 100
Astoria, OR 97103
(503) 325-8500

Columbia Co. Vital Records
County Clerks' Office
230 Strand St.
St. Helens, OR 97051
(503) 397-3796

Coos Co. Health Dept.
Vital Records Section
1975 McPherson
North Bend, OR 97459
(541) 756-2020

Crook Co. Health Dept.
Vital Records Section
375 NW Beaver St., Ste. 100
Prineville, OR 97754
(541) 447-5165

Curry Co. Health Dept.
Vital Records Section
94235 Moore St.
Gold Beach, OR 97444
(541) 247-3300

D

Deschutes Co. Health Dept.
Vital Records Section
2577 NE Courtney Dr.
Bend, OR 97701
(541) 322-7400

D

Douglas Co. Health Dept.
Vital Records Section
621 W. Madrone, Rm. 109
Roseburg, OR 97470-3010
(541) 440-3513

G

Gilliam County Vital Records
County Clerk's Office
221 S. Oregon
Condon, OR 97823
(541) 384-2311

Grant Co. Health Dept
Vital Records Section
528 East Main St., Ste. E
John Day, OR 97845-1240
(541) 575-0429

H

Harney Co. Health Dept.
Vital Records Section
420 N. Fairview
Burns, OR 97720
(541) 573-2271

Hood River Co. Health Dept.
Vital Records Section
1109 June St.
Hood River, OR 97031
(541) 386-1115

J

Jackson Co. HHS
Vital Records Section
1005 E. Main St., Bldg. A
Medford, OR 97504
(541) 774-8210

Jefferson Co. Health Dept.
Vital Records Section
715 SW 4th St., Ste. C
Madras, OR 97741
(541) 475-4456

Josephine Co. Health Dept.
Vital Records Section
715 NW Dimmick
Grants Pass, OR 97526-1802
(541) 474-5328

K

Klamath Co. Health Dept.
Vital Records Section
3314 Vandenberg Rd
Klamath Falls, OR 97603
(541) 882-8846

L

Lake Co. Health Dept.
Vital Records Section
100 North "D" St., Ste. 100
Lakeview, OR 97630
(541) 947-6045

Lane Co. Public Health
Vital Records Section
151 W. 7th Ave., Rm 520
Eugene, OR 97401
(541) 682-4045

Lincoln Co. Health and Human Services
Vital Records Section
36 SW Nye St.
Newport, OR 97365-3821
(541) 265-4127

Linn Co. Health Dept.
Vital Records Section
315 SW 4th Ave.
P.O. Box 100
Albany, OR 97321
(541) 967-3888

M

Malheur Co. Health Dept.
Vital Records Section
1108 SW 4th St.
Ontario, OR 97914
(541) 889-7279

Marion Co. Health Dept.
3180 Center St. NE #2274
Salem, OR 97301
(503) 588-5406

Morrow Co. Clerk's Office
100 S Court St.
Heppner, OR 97836
(541) 676-5601

Multnomah Co. Health Dept.
Vital Records Section
Lloyd Corp. Plaza South Bldg.
847 NE 19th Ave., Ste. 350
Portland, OR 97232
(503) 988-3745

P

Polk Co. Health Dept.
Vital Records Section
182 SW Academy St, Ste. 302
Dallas, OR 97338
(503) 623-8175

S

Sherman
(See Wasco-Sherman Co.)

T

Tillamook Co. Health Dept.
Vital Records Section
801 Pacific Ave.
Tillamook, OR 97141
(503) 842-3900

U

Umatilla Co. Health Dept.
Vital Statistics Section
200 SE 3rd St.
Pendleton, OR 97801
(541) 278-5432

Union Center for Human Development, Inc.
Public Health Services
2301 Cove Avenue
La Grande, OR 97850
(541) 962-8823

W

Wallowa Co. Health Dept.
Vital Records Section
758 NW 1st Street
Enterprise, OR 97828
(541) 426-4848

Wasco-Sherman Co. Health Dept.
Vital Records Section
419 E. 7th Street, Ste. 100
The Dalles, OR 97058
(541) 506-2628

Washington Co. Health Dept.
Vital Records Section
155 N. 1st Ave., Room 160
Hillsboro, OR 97124
(503) 846-8280

Wheeler Co. Health Dept.
Vital Records Section
701 Adams Street
Fossil, OR 97830
(541) 763-2400

Y

Yamhill Co. Health Dept.
Vital Records Section
412 NE Ford Street
McMinnville, OR 97128
(503) 434-7477