Birth Certificate Application

Complete this form to order a certified copy of a Minnesota birth certificate.

You must fill in the information we ask for on this form. We need the information to find the correct birth record and to make sure that you may receive the certificate. If we cannot find the birth record you asked for, we will send you a certified "Statement of No Birth Record Found". *Minnesota Rules, part 4601.2600*

Information to find the requested birth record

Minnesota Rules, part 4601.2600, subpart 2

Child/Subject	Child/subject first name	Child/subject middle name	Child/subject last name	Name suffix
	Date of birth (MM/DD/YYYY)	Sex ☐ Female ☐ Male	Minnesota city of birth	Minnesota county of birth	State of birth **MN**
Parents	Parent one first name	Parent one middle name	Parent one last name	Last name before 1st marriage	Name suffix
	Parent two first name	Parent two middle name	Parent two last name	Last name before 1st marriage	Name suffix

Requester - person completing this application

Minnesota Rules, part 4601.2600, subpart 3

Requester	Requester full name	Date of birth (MM/DD/YYYY)	Daytime phone (10-digit)
	Requester mailing address – street	Apt/Unit #	Email
		City	State	ZIP Code™

MANDATORY — Check the boxes below that describe your relationship to the subject of the record:

Marital status is important. Records of children born to married parents are "public". That means that the certificate is available to those listed in items 1 – 18 below. Records of children born to single mothers are "confidential" unless the mother chose to make the record public at the time of birth. Only the persons listed below in items 19 – 23 may obtain confidential birth certificates. *Minnesota Statutes, section 144.225, subdivisions 2 and 7.*

"Public" birth records are available to individuals who meet any of the legal requirements in items 1-18

1. ☐ A parent named on the subject's record
2. ☐ A grandparent of the subject
3. ☐ A great grandparent of the subject
4. ☐ A child of the subject
5. ☐ A grandchild of the subject
6. ☐ A great-grandchild of the subject
7. ☐ Spouse of the subject (You must be the current spouse)
8. ☐ I am the subject; I am requesting my own birth record
9. ☐ The legal custodian, guardian, or conservator of the subject (we need a certified copy of the court order that names you)
10. ☐ The health care agent for the subject (we need a valid "health care power of attorney" document)
11. ☐ Subject's personal representative who requires the birth certificate for administration of the subject's estate
12. ☐ Successor of a deceased subject who requires the birth certificate for administration of the subject's estate
13. ☐ Person who demonstrates a need for a birth certificate to determine or protect a personal or property right
14. ☐ Adoption agency — to complete post-adoption search (we need a copy of your Employee ID)
15. ☐ Local/state/tribal or federal governmental agency (we need a copy of your Employee ID) (Best practice: wait for family to verify the record).
16. ☐ Attorney – I represent the subject, or a person listed in items 1-14 above.
    My **Minnesota** Attorney License Number is:
    If you are a NON-Minnesota attorney, attach a copy of your attorney license.
17. ☐ Pursuant to a valid, certified copy of a U.S. court order (not a subpoena) releasing the certificate
18. ☐ I have a signed statement from a person above; it specifies the subject's full name, date of birth, parents' names, the signer's relationship to the subject of the record and it authorizes me to obtain the certificate.

"Confidential" birth records are available only under the conditions, or to the person, in items 19-23

19. ☐ Parent named on the subject's record
20. ☐ The legal custodian, guardian, or conservator of the subject (you need a certified copy of a court order naming you)
21. ☐ The subject, when *16 years old or older*
22. ☐ Representatives of Minnesota programs that administer child support, medical assistance, MinnesotaCare, and services under Minnesota Statutes, sections 124D.23; Minnesota Statutes, chapter 260E; and, tribal child support programs, Minnesota Statutes, section 144.225, subdivision 2, paragraph (f). (we need a copy of your Employee ID)
23. ☐ Pursuant to a valid, certified copy of a U.S. court order (**not** a subpoena) releasing the certificate

Requester's signature and signature of notary public

I certify that the information on this application is correct and complete to the best of my knowledge.

Requester's signature (Requester named above must sign here)		Notary Stamp/Seal
Signed or attested before me on:_____day of_____, 20____		
Printed name of notary public	My commission expires	
Notary public signature		

Birth Certificate Application

Complete this form to order a certified copy of a Minnesota birth certificate.

Quantity and cost – make checks payable to: Hennepin County Treasurer	Quantity	Fee	Total
One birth certificate		$26	$26
How many extra copies do you want? Additional copies are $19 each at the time of this purchase		$19	
How do you want your request processed?		**Fee**	
Standard – your request processed in the order received		$0	$0
Faster – your request goes ahead of standard requests ***(Does not include return overnight mail delivery)***		$20	
You must pay the full amount for the noncertified records and services that you ask for. **Fees are due at the time of application and are non-refundable.** *Minnesota Statutes, section 144.226.*		**Total due:**	

Send application and payment to Hennepin County Vital Records Office:

Vital Records Office
Hennepin County Government Center
300 South 6th St, MC- 678B
Minneapolis MN 55487-0678

FAX # 612-348-2010

If you have questions, please contact us at vitalrecords@hennepin.us or call 612-348-8919

Office use only		
DCN/Certificate # _____ ID type _____ ID # _____	Number of copies _____ Amount $ _____	Initials _____ Issue date _____