



CITY AND COUNTY CLERK AND RECORDER

One DesCombes Drive • Broomfield, CO 80020 • 303.438.6332 • Broomfield.org

APPLICATION FOR CERTIFIED COPY OF BIRTH CERTIFICATE

Incomplete information will result in rejection of this application

Person Making Request's Legal Name		Date:	Phone #
Address		City	State Zip
By signing, I have read and understood that Pursuant to Colorado Revised Statutes, 1982, 25-2-118 and as defined by Colorado Board of Health Rules and Regulations, applicant must have a direct and tangible interest in the record requested. The penalties for obtaining a record under false pretenses include a fine of not more than \$1,000, or imprisonment in the county jail for more than one year or both such fine and imprisonment (CRS 25-2-118)		How are you related to the person on Birth Certificate Self _____ Parent _____ Spouse _____ Other _____ Specify _____	
Reason for request	<input type="checkbox"/> ID/Driver's License <input type="checkbox"/> Travel/Passport <input type="checkbox"/> School <input type="checkbox"/> Medicaid <input type="checkbox"/> Newborn <input type="checkbox"/> Social Security <input type="checkbox"/> Social Services <input type="checkbox"/> Employment Other:(specify) _____		
	Signature of person making request		
How many copies do you want?		Search and/or First Copy \$20	Each Additional Copy \$13

Information about person whose birth certificate is requested - please print

Full Name at Birth	First			Middle Name	Last Name (Maiden Name)
	Month	Day	Year	If yes, date of death	
Date of birth				Is this person deceased? No or Yes	
Place of birth	City			County	State
				Colorado	
Name of mother (maiden)	First			Middle	Maiden
Full name of father	First			Middle	Last

Credit Card Number: _____ Exp Date: _____
 Billing zip code: _____ CCV Code: _____

For Staff Use Only:	State File # _____
Certificate Number: _____	Date Issued: _____ Receipt #: _____ Type: _____ Registrar: _____

PLEASE INSURE ALL INFORMATION ON YOU'RE APPLICATION IS COMPLETE.

Drop application in drop box or mail application, payment, and COPY of your driver's license or ID card to

*Health and Human Services
100 Spader Way
Broomfield, CO 80020*

Requests may also be made by using Vitalchek.com

Questions, please call 720.887.2270

*Certified certificates may issued to:		
The registrant (person named on certificate)	Spouse	Parents
Adult Children		
Grandparents	Great Grandparents	Grandchild
Stepparents		
Siblings	Legal Guardian	Legal representative

ID REQUIREMENTS

For complete list, visit: www.colorado.gov/cdphe/vitalrecords

At least 1 of the following: (No expired documents accepted)	OR at least 2 of the following: (Any document expired more than six months will not be accepted)
'PRIMARY' LIST	'SECONDARY' LIST
*Alien Registration Receipt/Permanent Resident Card	*Acknowledgment of Paternity document (Colorado only)
*Certificate of U.S. Citizenship	*Birth Certificate of Applicant (U.S. only)
*Jail Temporary Inmate ID: Denver and Pueblo County	*Court order of adoption or name change
*Colorado Department of Corrections ID card	*Craft of trade license (Colorado only)
*CO Temporary Driver's license/State ID (DMV - must be current)	*DD-214
*Department of Human Services Youth Corrections ID	*Divorce Decree (U.S. only)
*Employment Authorization Card (I-766)	*Colorado Gaming License
*Foreign Passport	*Hospital birth worksheet (within 6 months of birth)
*Government Work ID	*Hunting or Fishing License (must be current-Colorado only)
*Job Corps ID	*IRS-TIN card/letter
*Photo Driver's license/State ID (DMV - U.S. only)	*Marriage license / certificate (U.S. only)
*School, University or College ID Card (must be current)	*Medicare card
*Temporary Resident Card	* Foreign or International Driving License (with photo)
*U.S. B1/B2 Visa card with I-94	*Mexican Voter Registration card
*U.S. Certificate of Naturalization	*Motor vehicle registration or title (must be current-U.S. only)
*U.S. Citizenship ID Card (I-197)	*Pilot license
*U.S. Military ID card (front and back)	*Selective Service Card (U.S. only)
*U.S. Passport (Book or Card)	*Social Security card / letter (U.S. only)
*U.S. Merchant Mariner Card/Book	*State or Federal prison or corrections ID card
	*Weapon or Gun Permit (U.S. only)
	*Work ID, Paycheck stub (within 3 months), or W2 (last tax year)
	*Any expired document from the "Primary" list (cannot be expired more than 6 months)

WE CANNOT ACCEPT: * Matricula Consular Card * Novelty ID Card * Medicaid Card/WIC * Non-expiring ID cards (unless issued within last 5 years) * Souvenir/Hospital birth certificates * Out-of-state 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.

Other local Vital Records offices

Boulder County Vital Records
Tri-County Vital Records
Denver County Vital Records

3450 Broadway, Boulder
4201 E 72nd Avenue, Commerce City
120 W 5th Avenue, Denver

303.441.1100
720.200.1401
303.602.3660