



Vital Records Office – First Floor
 477 23rd Street, Ogden, UT – 84401
 Office Hours: Monday – Friday 8 a.m. to 5 p.m.
 (801) 399-7130 – www.webermorganhealth.org
**Applications taken after 4 p.m. will be processed the next business day.*

First certified copy \$22.00*
Each additional certified copy (ordered at the same time) \$10.00*
**Fees Subject to change. Please review the certificate for accuracy; certificates will only be replaced within 90 days of the issue date. If the requestor does not respond to a notice from Vital Records within 90 days, WMHD may retain all monies paid.*

Birth Certificate Request Form

*We have records for all of Utah for the previous 100 years.
 Birth Records over 100 years may be available at the Utah State Archives.*

Full Name on Record: _____ Is Person Deceased?
First Middle Last Yes No

Date of Birth: _____ **City:** _____ **County:** _____ **Hospital:** _____

Parent 1 Full Birth Name _____ **Date of Birth:** _____

Parent 2 Full Birth Name _____ **Date of Birth:** _____

***Note: Positive identification is required (see reverse).** If submitting by mail, please include a copy of both sides of your identification. Certificates may be ordered by the named individual or by their parent, sibling, current spouse, child, grandparent, or grandchild. Otherwise, proof of legal need is required. Records may be requested by the general public 100 years or more after the date of birth. It is a criminal violation to make false statements on vital records forms or to fraudulently obtain a vital record.*

Individual Making Request – Valid ID and Proof of Relationship Required

See back of application for list of acceptable identification and proof of relationship requirements.

Name: _____ **Telephone number:** _____

Address: _____
Street Address City State ZIP

Relationship to individual on certificate: Self Parent Sibling Spouse Child Grandparent Grandchild

Signature: _____ **Date:** _____

Number of Certified Copies Requested

If this order is to be mailed, please print the complete mailing address below:

1 Non-Refundable Search-Includes 1 Certified copy: \$ 22.00

Additional certified copies x \$10.00 each: \$ _____

Total: \$ _____

No cash or credit/debit cards by mail.

Make check or money order payable to WMHD.

For Office Use Only

ID _____ **Exp** _____ ID Attached **Date** _____

Payment Method: Cash Check/M.O. Credit/Debit* **Request #** _____ **Clerk Initials** _____

Change Given \$ _____ **Check or CC #** _____ **Date Completed (if applicable)** _____ **Int** _____

Date Mailed (if applicable) _____ **Qty** _____

Acceptable Identification List to Obtain Vital Records

ID Must Be Current

Identification is required for all non-public Vital Records. Mailed requests must include an easily identifiable photocopy of the front and back of the identification from the list below.

One form of identification from the “Primary” list is required or two forms of identification from the “Secondary” list.

Primary (Need 1)

OR

Secondary (Need 2)

- Government Issued Photo Driver License
- Government Issued Photo identification
- Employment Authorization Card
- U.S. Military Identification Card
- Tribal Identification Card
- Permanent Resident Card
- Foreign Visa
- U.S. Passport
- U.S. Passport Card
- Foreign Passport
- U.S. Naturalization Certificate
- U.S. Certificate of Citizenship
- Matricula Consular Card
- Concealed Weapon Permit
- Mexican Voter Registration Card
- Jail/Prison Release Form (with photo)
- Veteran’s Health ID Card
- Work Identification, Paycheck Stub, or W-2
- School, University, or College Identification Card
- Voter Registration Card
- Social Security Card
- U.S. Military Separation/DD-214
- Motor Vehicle Registration or Title
- Marriage License (certified copy with signatures)
- Court Order or Court Document
- Jail or Prison Document
- Probation Document
- Property Tax Receipt
- Selective Service Card
- Hunting or Fishing License
- Insurance Card or Document
- Utility Bill
- Business License
- Professional License

We Cannot Accept: Driving Privilege Card or Novelty Identification Card as prohibited by UCA 53-3-207(7)(b)(ii).

If you cannot provide acceptable identification then another person who is entitled to the record may make the request for you and provide their acceptable identification. This includes: Registrant (person whose record it is), Spouse, Parent, Child, Sibling, Grandparent, Grandchild. (this does not include ex-spouse, stepfamily, or in-laws)

Proof of Relationship

I am requesting a Birth Certificate for “Person A”

