



## **Self-Attestation Form for Registrants 18 Years of Age and Older**

Use the attached form to affirm and attest that a birth certificate's gender marker should be changed. Follow the instructions below. Missing information may delay the application review process.

1. Provide a response for every blank line.
2. Sign and notarize the form.
3. Submit the following documents with the signed and notarized Attestation or Self-Attestation Form:
  - A completed [Birth Certificate Correction Application Form](https://on.nyc.gov/birthcertcorrect) — find the form at [on.nyc.gov/birthcertcorrect](https://on.nyc.gov/birthcertcorrect).
  - A check or money order for \$55 (\$40 processing fee plus \$15 fee for new certificate) made payable to the NYC Department of Health and Mental Hygiene
4. Mail the completed form and all required documents to:

NYC Department of Health and Mental Hygiene Corrections Unit  
Attention: Group A  
125 Worth Street, Room 144, CN-4  
New York, NY 10013

For questions on how to complete an application, email [tgny@health.nyc.gov](mailto:tgny@health.nyc.gov).

**I. Applicant/Registrant Information:**

First Name	Middle Name	Last Name
Date of Birth	Street Address, Apartment Number	
City	State	ZIP Code
Certificate Number:		Telephone Number

**II. Attestation:**

I, \_\_\_\_\_, hereby attest under the  
Applicant/Registrant (print name)  
penalty of perjury that the request to change the gender marker on my birth certificate  
number \_\_\_\_\_, from \_\_\_\_\_ to \_\_\_\_\_, is to reflect  
M, F, or X\* M, F, or X  
my true gender identity and is not for any fraudulent purpose.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be completed by Notary State of _____ County of _____ Subscribed and sworn before me: this _____ day of _____, 20_____ _____ Notary Public Signature	Notary Public Seal
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**Warning: No person shall make a false, untrue, or misleading statement or forge the signature of another on an application required to be prepared pursuant to the New York City Health Code. A violation of the Health Code shall be punishable as a misdemeanor. (NYC HEALTH CODE 3.19).**

\*M is male, F is female, and X is a gender that is not exclusively male or female (a nonbinary gender identity).