

Premium Mail Service Application To Request an NYC Birth Certificate

Use this form only to request an NYC birth certificate with premium mail service. Visit nyc.gov/vitalrecords for current processing times, order status, and additional information.

(Please print clearly and fill out in English only. Translations of this form are available online for reference only.)

Who Can Apply for an NYC Birth Certificate?

- To apply for a birth certificate, you must be the person named on the certificate and at least 18 years old or be the parent or legal guardian of the person named on the certificate.
- The person named on the certificate must have been born within the five boroughs of NYC (the Bronx, Brooklyn, Manhattan, Queens, and Staten Island).
- If you are an attorney submitting a request on behalf of a client, do not use this form. Instead, use the Attorney Protocol for NYC Birth Certificates form, available at on.nyc.gov/birth-certificate-attorney.

How Do I Request an NYC Birth Certificate?

- **Step 1:** Go to Page 3 and complete all the information requested in Sections One and Two. Leaving information blank will lead to delays in completing your request.
- Step 2: Select the reason you are requesting a birth certificate in Section Three. The reason you select will determine whether you receive a short form birth certificate or long form birth certificate. Most people need a short form birth certificate, which can be used for domestic purposes within the U.S., such as getting a driver's license or U.S. passport.
 - If you are requesting a birth certificate and need an apostille (certificate of authentication), select that you want a long form birth certificate. You will be issued a long form birth certificate along with a Letter of Exemplification, which you must get notarized by the Office of the County Clerk. You can then use the long form birth certificate and Letter of Exemplification to obtain an apostille. Apostilles are issued by the New York State (NYS) Department of State.
- Step 3: Notarize Page 5. Make sure to sign and date the form.
- Step 4: You must submit a legible copy of your current (not expired) and signed photo identification (ID). Photocopies of your ID must be clear. See Page 2 for types of acceptable ID and what you can submit if you do not have a current photo ID.

Fees and Mailing Instructions

- The NYC Department of Health and Mental Hygiene charges \$15 for each birth certificate requested. A
 maximum of three copies can be ordered.
- Premium mail service has a processing fee of \$7.50.
- Make your check or money order payable to: NYC Department of Health and Mental Hygiene. Cash
 or starter checks are not accepted. If you are applying for a birth certificate from outside the U.S., an
 international money order issued by a U.S. bank in U.S. dollars is required.
- Mail your completed and notarized application, copy of your current photo ID, and payment (check or money order) to the address on Page 5.
- Birth certificates cannot be mailed to addresses that are labeled "in care of."
- Order online: For faster application processing, visit <u>vitalchek.com</u>. Online orders are processed within 72 hours on weekdays, and UPS express mail delivery is available. Only the person or parent(s) named on the birth certificate can order online.

VR 69 (Rev. 4/25)

Table 1. ID Requirements

Category 1: Identity Documents

Provide **one** of the following identity documents. The document must include your photo and signature and must not be expired.

Driver's license or non-driver's ID card	University or college ID with a current transcript			
New York State (NYS) benefit card	Inmate ID with current release papers			
U.S. or foreign passport with a signature	Job ID with a current pay stub			
IDNYC municipal ID	NYC Access-A-Ride card			
U.S. certificate of naturalization (must be the original)	NYC MTA Reduced-Fare MetroCard			
Military ID card (must be for the person whose birth certificate is being requested)				

Table 2. Proof of Address Requirements

Category 2: Proof of Address Documents

If you do not have any of the Category 1 documents, then provide any **two** of the following proof of address documents. The documents must be dated within the last 60 days and show your name and address.

For example, you can submit one phone bill from the last 60 days and one letter from a government agency from the last 60 days. Alternatively, you could submit two phone bills, as long as they are both from the last 60 days. Your birth certificate will be mailed to the address on the documents provided.

Utility bill	Official government mail addressed to you	
Telephone bill	Rent invoice (mortgage or lease letter)	
Medical bill		

If you cannot provide any of the documents in Tables 1 or 2, call **311** or email nycdohvr@health.nyc.gov. If calling from outside NYC, call 212-NEW-YORK (212-639-9675).

Section One: What Is Your Name?

You must be at least 18 years old. Please print clearly and use black ink only. Use the name that currently appears on your ID. All the fields below are required. Birth certificates cannot be mailed to addresses that are labeled "in care of."

FIRST NAME	MIDDLE NAME		LAST NAME	Ē
MAILING ADDRESS				APARTMENT NUMBER
CITY	STATE		ZIP CODE	
PRIMARY PHONE NUMBER	<u> </u>	ALTERNATE PHONE NUI	MBER (IF AP	PLICABLE)
EMAIL ADDRESS		<u> </u>		
Relationship to the person named on	the birth certificate	e:		
\square I am requesting my own birth certif	ficate.			
$\hfill\square$ I am the mother/parent of the pers	on named on the b	oirth certificate.		
\square I am the father/parent of the perso	n named on the bir	rth certificate.		
Section Two: Birth Certificate Info	rmation			
In this section, write the names as	they currently ap	pear on the birth	certificat	te that you are requesting.
Name on the birth certificate as it cu	rrently appears:			
FIRST NAME	MIDDLE NAME		LAST NAME	
Date of birth listed on the birth certifi	icate (month/day/y	ear):		
If you do not know the exact date of information about search fees):	birth, fill out the ra	inge to search (mo	nth/day/y	/ear) (see Page 5 for
Start date:		End date:		
Sex on the birth certificate: ☐ Male *X is a gender that is not exclusively male of		gender identity)		
Borough where born (leave blank if u	,	goridor idomity).		
☐ Bronx ☐ Brooklyn ☐ Manhatta	,	Staten Island		
Mother/parent's maiden name on	the birth certifica	ite:		
FIRST NAME		MAIDEN LAST NAME		
Father/parent's name on the birth	certificate:			
FIRST NAME		LAST NAME		
Place of birth on the birth certificate (leave blank if unknown):				
NAME OF HOSPITAL, BIRTHING CENTER, OR, IF	AT HOME, STREET ADDRI	ESS, CITY, STATE, ZIP CO	DE	

VR 69 (Rev. 4/25)

3

Section Three: Reason for Request

Check off why you are requesting a birth certificate and how many you are requesting.

There are two types of birth certificate. You can request either type. The cost is the same.

- Short form: Most people request a short form birth certificate. It can be used for most domestic purposes within the U.S., such as obtaining a driver's license or U.S. passport. This certificate includes the first and last name of the person named on the certificate and their place of birth, date of birth, sex at birth, file date, and mother/parent's and father/parent's first and last names.
- Long form: The long form birth certificate includes the same information as the short form birth certificate, as well as additional information such as the time of birth, name of the hospital, and parent(s) birthplace(s). This certificate is generally used for international purposes, such as dual citizenship, international adoption, international marriage, and obtaining an apostille.

In the following table, check off the reason you are requesting a birth certificate. <u>The reason you select</u> will determine whether you receive a short form or long form birth certificate.

Why	What you will receive:		
 □ U.S. passport or travel □ Inheritance or estate settlement (U.S. only) □ Marriage (U.S. only) □ Legal purposes 	 ☐ Government assistance or benefits ☐ Employment ☐ School or sports ☐ Insurance, pension, or retirement 	☐ Income tax ☐ Adoption (U.S. only) ☐ Personal records or use ☐ Other	Short form birth certificate
☐ Driver's license	☐ Social security or benefits		
☐ Apostille☐ Dual citizenship or immigration☐ Adoption (international only)	 ☐ Marriage (international only) ☐ Time of birth ☐ International use, or use abroad ☐ International inheritance or estate settlement 	□ Other	Long form birth certificate

How many birth certificates will you need (maximum of three)? ☐ One ☐ Two ☐ Three

VR 69 (Rev. 4/25)

Section Four: Notarize Your Application

This application must be notarized. You only need to notarize this page. You must submit a copy of your current ID with this application. See Table 1 on Page 2 for accepted types of ID.

SIGNATURE OF APPLICANT	DATE (MONTH/DAY/YEAR)
To be completed by notary.	Notary Public Seal
State of	
County of	
Subscribed and sworn before me:	
this, day of, 20	
Notary Public Signature	

A copy of a birth certificate can be issued only to the person to whom the record of birth relates, if of age, or to a parent. It is a violation of law to make a false, untrue, or misleading statement or to forge the signature of another person on this application. Violations are a misdemeanor punishable by a fine of up to \$2,000.

Fees and How To Submit Your Application

Each birth certificate costs \$15. You can request a maximum of three birth certificates. If an exact date of birth is not known and a range is used instead, there is an additional search fee of \$3 for each consecutive year searched after two.

We only accept checks or money orders. Cash or starter checks are not accepted.

Make sure you do the following:

- Complete Sections One, Two, Three, and Four of the application.
- · Get Section Four notarized.
- Submit a photocopy of your current signed photo ID, or proof of address (see Tables 1 and 2).
- · Submit payment by check or money order.

Figure Out the Cost of Your Request	
Number of birth certificates requested (maximum of three):	
Multiplied by \$15 for each birth certificate equals:	\$
Plus \$3 search fee for every extra year searched after two × years:	\$
Plus premium mail service processing fee:	\$7.50
Total amount enclosed (sum of the dollar amounts above):	\$

Mail to:

NYC Department of Health and Mental Hygiene

Attention: Premium BC Request

125 Worth St., Room 119, CN-4

New York, NY 10013

For assistance with this application, call **311** or email nycdohvr@health.nyc.gov. If calling from outside NYC, call 212-NEW-YORK (212-639-9675).

VR 69 (Rev. 4/25) 5