Health

Voye pa lapòs aplikasyon ki fin ranpli a nan:
Mail completed application to:
Office of Vital Records (Office of Vital Records)
**Attn: Sealed Record Request**
125 Worth St., CN-4
New York, NY 10013-4090

GADE MACHASWIV YO AK FRÈ POU PEYE YO ANBA A AK SOU DO A.
Gen enfòmasyon anplis ki disponib tou nan https://www1.nyc.gov/site/doh/services/birth-certificates.page
SEE INSTRUCTIONS AND APPLICABLE FEES BELOW AND ON BACK.
Additional information is also available at https://www1.nyc.gov/site/doh/services/birth-certificates.page

# APLIKASYON POU PRE-ADOPSYON

## BATISTÈ AVAN-ADOPSYON

## BIRTH CERTIFICATE APPLICATION

Tanpri bay enfòmasyon yo ki anba a, jan yo parèt **sou batistè NYC ou genyen aktyèlman an (apre-adopsyon).** Ekri aklè ak lèt detache.
Please provide the information below as it appears **on your current NYC Birth Certificate (post-adoption).** Print clearly.

1. NON FANMI SOU BATISTÈ AKTYÈL LA (APRE-ADOPSYON)/ LAST NAME ON CURRENT BIRTH CERTIFICATE (POST-ADOPTION)

2. PRENON KI SOU BATISTÈ AKTYÈL LA (APRE-ADOPSYON)/ FIRST NAME ON CURRENT BIRTH CERTIFICATE (POST-ADOPTION)

3. FEMALE/FI ☐ MALE/ GASON ☐ X ☐

4a. DAT NESANS/DATE OF BIRTH
MWA MM | JOU DD | ANE (4 CHIF) YYYY

4b. SI OU PA KONNEN DAT NESANS EGZAK LA, ANTRE PERYÒD RECHÈCH LA ANBA A/ IF YOU DON'T KNOW THEEXACT DATE OF BIRTH, ENTER SEARCH RANGE BELOW
SOTI FROM: MWA MM | JOU DD | ANE (4 CHIF) YYYY
RIVE TO: MWA MM | JOU DD | ANE (4 CHIF) YYYY

5. NON LOPITAL LA OSWA ADRÈS KOTE NESANS LAN FÈT, JAN LI ENDIKE SOU BATISTÈ AKTYÈL LA/ NAME OF HOSPITAL OR ADDRESS WHERE BORN, AS LISTED ON CURRENT BIRTH CERTIFICATE

6. MINISIPALITE KOTE NESANS LAN FÈT: BOROUGH WHERE BORN: MANHATTAN ☐ BRONX ☐ BKLYN ☐ QUEENS ☐ STATEN ISLAND ☐

7. NON MANMAN/PARAN AVAN PREMYE MARYAJ SOU BATISTÈ AKTYÈL LA (APRE-ADOPSYON)/MOTHER/PARENT'S NAME PRIOR TO FIRST MARRIAGE ON CURRENT BIRTH CERTIFICATE (POST-ADOPTION)
PRENON/FIRST: NON FANMI/LAST:

8. NIMEWO BATISTÈ AKTYÈL LA (*si ou konnen l*)/ CURRENT BIRTH CERTIFICATE NUMBER (if known)

9. NON PAPA/PARAN AVAN PREMYE MARYAJ SOU BATISTÈ AKTYÈL LA (APRE-ADOPSYON)/ FATHER/PARENT'S NAME PRIOR TO FIRST MARRIAGE ON CURRENT BIRTH CERTIFICATE (POST-ADOPTION)
PRENON/FIRST: NON FANMI/LAST:

10. KI RELASYON OU GENYEN AK MOUN NAN KI SOU BATISTÈ AVAN-ADOPSYON SA A? ☐ Oumenm (laj 18 lane oswa plis)
10. HOW ARE YOU RELATED TO THE PERSON ON THIS PRE-ADOPTION BIRTH CERTIFICATE? ☐ Self (18 years of age or older)
☐ Desandan dirèk moun adopte ki mouri (gen ladan pitit, pitit-pitit, oswa pitit-pitit-pitit moun adopte ki mouri a) Presize: ____________
Direct line descendant of deceased adoptee (includes child, grandchild or great-grandchild of deceased adoptee) Specify: ____________
☐ Reprezantan legal ki angaje nan non reprezantan moun adopte ki vivan / Lawful representative hired on behalf of living adoptee
☐ Reprezantan legal ki angaje nan non desandan dirèk moun adopte ki mouri / Lawful representative hired on behalf of direct line descendant of deceased adoptee

**TANPRI EKRI ANBA A AKLÈ AN LÈT DETACHE ADRÈS POSTAL OU AK ENFÒMASYON POU KONTAKTE W/ PLEASE PRINT YOUR MAILING AND CONTACT INFORMATION CLEARLY BELOW**

NON/NAME

ADRÈS RISTREET ADDRESS — NO. APT/APT. NO.

VIL/CITY — ETA/STATE — KÒD POSTAL/ZIP CODE

NIMEWO TELEFÒN LAJOUNEN DAYTIME PHONE NUMBER: Aryèkòd/ Area Code — Telephone number Telephone number

IMÈL/ EMAIL

REMAK: Se yon vyolasyon lalwa si ou fè yon deklarasyon ki fo, ki pa vrè oswa deklarasyon pou twonpe, oubyen si ou fòje siyati yon lòt moun sou aplikasyon sa a. Vyolasyon yo se yon deli ki ka sibi pinisyon yon amann jiska $2,000.
NOTE: It is a violation of law to make a false, untrue or misleading statement or forge the signature of another person on this application. Violations are a misdemeanor punishable by a fine of up to $2,000.

11. SIYATI KLIYAN AN AK DAT LA/ CUSTOMER SIGNATURE AND DATE:
**SIYATI/SIGNATURE:**____________________**DAT/DATE:** __________

12. KÒMANTÈ KLIYAN AN/LÒT ENFÒMASYON ANPLIS/ CUSTOMER COMMENTS/ADDITIONAL INFORMATION:

**FRÈ YO** Frè a se $15, epi ou pral resevwa yon sèl kopi batistè avan-adopsyon an. Pèman an ka fèt ak chèk oswa manda postal (money order) sèlman sou non "NYC Health Department." Frè a gen ladan yon rechèch de-ane-youn-dèyè-lòt.

**FEES** The fee is $15, and you will receive one copy of the pre-adoption birth certificate. Payment can be made by check or money order only, payable to "NYC Health Department." The fee includes a two-consecutive-year search.

| | |
|---|---|
| Batistè avan-adopsyon | $15 |
| Pre-adoption birth certificate | $15 |
| $3 pou chak ane anplis ou chèche x __________ ane = | $_________ |
| $3 for each extra year searched x __________ years = | $_________ |
| Total lajan ou mete: | $_________ |
| Total amount enclosed: | $_________ |

SI BATISTÈ A PA NAN DOSYE, Y AP BAY YON "DEKLARASYON YO PA JWENN" SÈTIFYE. NOU PA AKSEPTE LAJAN KACH.
IF RECORD IS NOT ON FILE, A CERTIFIED "NOT FOUND STATEMENT" WILL BE ISSUED. CASH IS NOT ACCEPTED.

APLIKASYON KI SOUMÈT PA LAPÒS DWE NOTARYE.
APPLICATIONS SUBMITTED BY MAIL MUST BE NOTARIZED.

STATE OF

COUNTY OF

SUBSCRIBED AND SWORN BEFORE ME:
THIS _____DAY OF ____________, 20___
NOTARY PUBLIC SIGNATURE:

_________________________________________

NOTARY PUBLIC SEAL

**ENSKRI POU VOTE: WWW.VOTE.NYC**
**REGISTER TO VOTE: WWW.VOTE.NYC**

**REZÈVE POU ANPLWAYE:**
**STAFF USE ONLY:__________________________________________INDEX NO. NOT FOUND_____________STAFF INITIALS_________**

# ENFÒMASYON ENPÒTAN POU BATISTÈ AVAN-ADOPSYON

Tanpri bay enfòmasyon yo mande sou aplikasyon sa a baze sou sa ki endike aktyèlman sou batistè NYC ou (apre-adopsyon). Okenn enfòmasyon ki nan batistè avan-adopsyon an pa egzijib. Ou ka jwenn yon batistè avan-adopsyon si:

- Ou se moun ki adopte a epi ou gen laj 18 lane oswa plis.
- Ou se desandan dirèk moun ki adopte a, si moun ki adopte a mouri.
- Ou se yon reprezantan legal pou moun ki adopte a.
- Ou se yon reprezantan legal pou desandan dirèk la, si moun ki adopte a mouri.

Yon desandan dirèk se pitit, pitit-pitit, pitit-pitit-pitit oswa pitit-pitit-pitit-pitit moun ki adopte a. Yon reprezantan legal ka gen ladan avoka moun ki adopte a oswa desandan dirèk la.

Genyen disponib nan nyc.gov/vitalrecords machaswiv an detay pou mande batistè avan-adopsyon pou yon moun ki mouri ak pou avoka k ap soumèt demann nan non yon pati ki gen dwa (sètadi, pati ki gen dwa pou resevwa yon valè oswa yon avantaj lalwa prevwa). Tcheke paj Eta Sivil la avan ou soumèt aplikasyon ou an.

Pati ki gen dwa yo ap resevwa tou avèk batistè avan-adopsyon an nenpòt dokiman ki gen rapò ak adopsyon an ki gen nan dosye aktyèlman, tankou lòd adopsyon an. Ou pa oblije soumèt yon aplikasyon apa pou jwenn dokiman ki ka gen nan dosye ki gen rapò ak adopsyon an. N ap mete yon kopi dokiman (yo) ansanm ak batistè avan-adopsyon an.

- Defòme enfòmasyon, ki gen ladan imite yon siyati, pou jwenn yon batistè se yon deli sa ye, epi vyolatè yo kapab sibi tou yon amann jiska $2,000 pou chak vyolasyon.
- Yo bay dosye avan-adopsyon yo sou fòm batistè long sèlman. Fòm batistè long lan, yo rele tou batistè “orijinal”, “ofisyèl” oswa “gwosè konplè” se batistè an detay ki genyen nan dosye kay ajans ki te travay sou anrejistreman nesans lan.
- Nou pa bay Apostiy oswa Lèt Egzanplifikasyon pou dosye avan-adopsyon.
- Nou pa aksepte lajan kach ni kat kredi. Si w ap fè kòmann nan andeyò Etazini, voye yon manda postal (monye order) entènasyonal.
- Tcheke delè aktyèl trètman pou batistè avan-adopsyon yo nan nyc.gov/vitalrecords.

**Enfòmasyon postal:** Tout aplikasyon pa lapòs dwe siyen epi notarye. Voye aplikasyon ou an pa lapòs nan **Attention: Sealed Records Request**, 125 Worth St., CN-4, New York, NY 10013. Asire ou mete chèk oswa manda postal (money order) ou an sou non “NYC Health Department.” Frè a se $15, epi ou pral resevwa yon sèl kopi batistè avan-adopsyon an ak nenpòt dokiman ki ka genyen nan dosye ki gen rapò ak adopsyon an. Ou ka mande yon sèl batistè.

**Egzijans pou idantifikasyon (ID).** Ou dwe bay yon fotokopi ID klè nan Kategori 1 **oswa** kopi orijinal ID nan Kategori 2 (gade anba a).

**Kategori 1: Dokiman idantite yo.** Bay nenpòt nan sa ki annapre la yo, si li gen ladan foto ou, siyati ou epi li pa ekspire:

- Lisans Chofè oswa ID ki pa lisans chofè ki soti nan nenpòt Eta oswa teritwa Etazini
- Kat avantaj piblik
- Paspò ameriken oswa etranje
- Batistè natiralizasyon ameriken
- Kat Idantite Militè
- ID Anplwaye ki gen foto w, patwon ki ka verifye, ak souch pèman ki resan
- Metro Card MTA tarif-redwi
- Kat Idantite Elèv ak relve nòt aktyèl ki soti nan enstitisyon akredite epi ki ka verifye
- Kat idantite prizonye ki gen foto ak dokiman liberasyon

**Kategori 2: Prèv pou adrès.** Si ou pa gen okenn nan dokiman Kategori 1 yo, ou ka bay prèv adrès ou nan fason ki dekri anba a. Y ap voye batistè ou an nan kourye lapòs nan adrès ki sou dokiman ou bay yo.

De dokiman diferan ki gen yon dat ki pa depase 60 jou ki sot pase yo, si yo gen non ou ak adrès ou:

- Bòdwo sèvis piblik tankou dlo, elekstrisite, gaz, elatriye (ou ka telechaje epi enprime bòdwo sou entènèt nan sitwèb founisè sèvis ou an)
- Lèt ki soti nan yon ajans gouvènman

Si ou pa kapab bay idantifikasyon Kategori 1 oswa 2, tanpri kontakte Eta Sivil (Vital Records) nan **nycdohvr@health.nyc.gov**.

## IMPORTANT PRE-ADOPTION BIRTH CERTIFICATE INFORMATION

Please provide the information requested on this application based on what is currently listed on your NYC birth certificate (post-adoption). No information is required from the pre-adoption birth certificate. You can obtain a pre-adoption birth certificate if:

- You are the adopted person and are 18 years of age or older.
- You are the adopted person's direct line descendant, if the adopted person is deceased.
- You are a lawful representative for the adopted person.
- You are a lawful representative for the direct line descendant, if the adopted person is deceased.

A direct line descendant is the child, grandchild, great-grandchild or great-great-grandchild of the adopted person. A lawful representative may include the attorney of the adopted person or direct line descendant.

Detailed instructions for requesting the pre-adoption birth certificate of someone who is deceased and for attorneys submitting requests on behalf of an entitled party (i.e., party with rights to receive a value or benefit provided by law) are available at nyc.gov/vitalrecords. Check the Vital Records page before submitting your application.

Entitled parties will also receive any documents related to the adoption that are currently on file with the pre-adoption birth certificate, such as the adoption order. You do not have to submit a separate application to obtain adoption-related documents that may be on file. We will include one copy of the document(s) with the pre-adoption birth certificate.

- Falsifying information, including forging a signature, to obtain a birth certificate is a misdemeanor, and violators may also be subject to a fine of up to $2,000 per violation.
- Pre-adoption records are issued as long-form birth certificates only. Also known as the "original," "official" or "full-size" birth certificate, the long-form birth certificate is the detailed certificate on file with the agency that processes the birth record.
- Apostille or Letter of Exemplification is not issued for pre-adoption records.
- Cash and credit cards are not accepted. If ordering from outside the U.S., send an international money order.
- Check current processing times for pre-adoption birth certificates at nyc.gov/vitalrecords.

**Mailing information:** All mailed applications must be signed and notarized. Mail your application to **Attention: Sealed Records Request**, 125 Worth St., CN-4, New York, NY 10013. Be sure to include your check or money order payable to "NYC Health Department." The cost is $15, and you will receive one copy of the pre-adoption certificate and any adoption-related documents that may be on file. Only one certificate may be requested.

**Identification (ID) requirements.** You must provide a clear photocopy of ID from Category 1 **or** original copies of ID from Category 2 (see below).

**Category 1: Identity documents.** Provide any of the following, if it includes your photo, your signature and is unexpired:

- Driver's license or non driver's ID from any state or U.S. territory
- Public benefit card
- U.S. or foreign passport
- U.S. certificate of naturalization
- Military ID card
- Employee ID with photo, verifiable employer and recent pay stub
- MTA reduced-fare Metro Card
- Student ID and current transcript from accredited and verifiable institution
- Inmate photo ID with release papers

**Category 2: Proof of address.** If you do not have any of the Category 1 documents, you may provide proof of address as described below. Your certificate will be mailed to the address on the documents provided.

Two different documents dated within the past 60 days, if they show your name and address:

- Utility bills (online bills can be downloaded and printed out from your provider)
- Letter from a government agency

If you cannot provide Category 1 or 2 identification, please contact Vital Records at **nycdohvr@health.nyc.gov**.