

Birth Certificate Request

It's illegal to give false information to obtain a vital record, and it may subject you to fines, jail time, or both. (Minnesota Statutes 144.227)

Info	rmation to find the reque	ested b	irth re	ecord					Minnesota R	ules 4601.2600	
Child/Subject	Child/subject first name			Child/subject middle name				Child/subject last name			
g/s	Date of birth (MM/DD/YYY	y) Se		iviiiiiicoota city oi bii			Minnesota		unty of birth	State of birth	
Chil			Femal Male	le						MN	
Parents	Parent one first name	Parent	t one n	e middle name Parent one last name		9	Last name before 1st marriage				
	Parent two first name	o middle name Parent two last name		е	Last name before 1 st marriage						
REQ	UIRED – Requester infor	nation	1						Minnesota R	ules 4601.2600	
Requester	Requester full name					Date of birth (MM/DD/YYYY)			Daytime phone (10-digit)		
	Requester street address (Express delivery will not deliver to	PO addresses.)	Apt/Unit #			Email					
			City		•	State	Zip code				
REQ	UIRED — Mark the boxes	that d	describ	be your relati	ionship t	o the subje	ct of	the record	Minnesota St	tatutes 144.225	
Records of children born to married parents are "public". That means that the certificate is available to those listed in items 1 – 18 below. Records of children born to single mothers are "confidential" unless the mother chose to make the record public at the time of birth. Only the persons listed below in items 19 – 23 may obtain confidential birth certificates. "Public" birth records are available to individuals who meet any of the legal requirements in items 1-18 1. A parent named on the subject's record 2. A grandparent of the subject 5. A grandchild of the subject 6. A great-grandchild of the subject 7. Spouse of the subject (You must be the current spouse) 8. I am the subject; I am requesting my own birth record 9. The legal custodian, guardian, or conservator of the subject (we need a certified copy of the court order that names you) 10. The health care agent for the subject (we need a valid "health care power of attorney" document) 11. Subject's personal representative (we need a notarized statement that says you need the birth certificate to administer the estate) 12. Successor of the subject (subject is dead) (we need a notarized statement that says you need the birth certificate to administer the estate) 12. Adoption agency — to complete post-adoption search (we need a copy of your Employee ID) 15. Local/state/tribal or federal governmental agency (we need a copy of your Employee ID) 16. Attorney – I represent the subject, or a person listed in items 1-14 above. My Minnesota Attorney License Number is: copy of your attorney license. 17. Pursuant to a valid, certified copy of a U.S. court order (not a subpoena) releasing the certificate 18. have a signed statement from a person above; it specifies the subject's full name, date of birth, parents' names, the signer's relationship to the subject of the record and it authorizes me to obtain the certificate.											
	nfidential" birth records o			only under t	he cond	tions, or to	the p	erson, in item	s 19-23		
20. [21. [22. [□ Parent named on the subj □ The legal custodian, guard □ The subject, when 16 year □ Representatives of Minne Minnesota Statutes, secti Statutes, section 144.225 □ Pursuant to a valid, certifi 	ian, or o rs old or sota pro ons 124 subdiv	conser r older ograms ID.23; I	s that administ Minnesota Sta 2, paragraph (f)	er child s tutes, cha	upport, medi apter 260E; a ed a copy of y	cal ass nd, tri	sistance, Minnes ibal child suppo mployee ID)	sotaCare, and s	ervices under	

BIRTH CERTIFICATE REQUEST

Requester's name:									
REQ	JIRED – Sign this form in f	Min	nnesota Rules 4601.2600						
I certify that the information provided on this application is correct and complete to the best of my knowledge.									
Requester's signature (Signature must match the name of the requester on page one.)									
						Notary Stamp/Seal			
	Signed or attested before		riotal y otalinpy ocal						
Notary	Printed name of notary p								
S									
	Notary public signature	expires							
Fees	and records request	Fee							
First	birth certificate				\$26	\$26			
Addi	tional birth certificates		# of extra copies		\$19 each	1			
Vete	eran's Affairs (VA) birth cer	tificate (for VA purposes only)	# of	# of copies					
	essing	<u> </u>		•	\$0 Fee				
Stan	dard — request processed	l in the order received			\$0				
Fast	er — request handled ahea	ad of standard requests (doesr	n't include (express delivery)	\$20				
Ship	ping				Fee				
Regi	ular first-class mail				\$0				
Expr	ess delivery (optional)				\$30.45	_			
The Steele County Recorder and the express delivery service are not responsible for deliveries that do not require a									
:	signature. Express delivery	services will not deliver to PO b	boxes or AF	O addresses.		•			
For delivery outside the United States, you must supply a prepaid express delivery envelope with your									
Total due Fees are due with the application and are non-refundable.									
Payı	ment method					.1			
	redit card	Cardholder name			Valid (MM)				
	NasterCard/VISA/Discover	Card number			3-digi				
					code				
□c	Check #			Make check or money order payable to Steele County					
	Money ord	dort	Recorder. DO NOT SEND CASH. Checks returned for non-payment will result in a \$30 charge to you. You could also						
	Noney order	Jei#	face civil						
Send	d your application and pay								
Ma	il: Steele County Record	er	Email: recorder@steelecountymn.gov						
	630 Florence Ave.								
PO 890									
Owatonna, MN 55060									
Fax	Fax: 507-444-7459 (application with payment via credit card)								
If you have questions , contact the Office of Vital Records at <u>recorder@steelecountymn.gov</u> or 507-444-7490.									