

# Arkansas Department of Health Office of Vital Records

## BIRTH CERTIFICATE APPLICATION

Only Arkansas births are recorded in this office. Prior to February 1, 1914, only a limited number of birth records were filed.

## Birth certificates can be requested online, by telephone, by mail, or in-person.

When mailing in this application, include a copy of your photo ID with your payment to the Arkansas Department of Health and mail to the address listed in the payment section below. Please allow 7-14 days for processing by mail.

List Below All Possible Birth Dates and Names Under Which the Certificate May be Registered. (Type or Print)								
1.	Full Name at Birth	First Name			Middle Name	Last Name		
2.	Date of Birth	Month	Day	Year	Sex	Age at Last Birthday		
		City or Town			County	State		
3.	Place of Birth	Name of Hospital or Street Address						
4.	Full Name of Father	First Name		Middle N	ame	Last Name		
5.	Full Maiden Name of Mother (Name Before Marriage)	First Name		Middle N	lame	Last Name		
If this child has been adopted, please give original name if known.								
If this is a delayed certificate, when was it filed?								
What is your relationship to the person whose certificate is being requested?								
What is your reason for requesting this certificate?								
Is the person whose certificate is being requested still living? Yes No								
Signature and contact information of person requesting this certificate.								
X								
S	gnature	Date	Cont	act Number	Em	ail Address		

A valid government-issued photo identification card must be provided to obtain a certificate of birth. The id must contain 1) a photo, 2) current address, 3) signature, and 4) a unique number or barcode (such as driver's license number, passport number, etc.) assigned to the person.

#### A copy of any one of the following forms of photo identification is acceptable:

- U.S. issued Driver's License or Identification Card
- U.S. Territories Driver License or Identification Card
- Tribal Identification Card that contains the person's signature (note: some cards do not)
- Passport (U.S. or Foreign issued)
- Visa in passport (and the person's signature is on the passport, not the Visa)
- Resident Alien Card (Form 1-551)
- Employment Authorization Card (Form 1-766)
- Employment Authorization Card (Form 1-688A)
- Temporary Resident Card (Form 1-688)

Any person who willfully and knowingly makes any false statement in an application for a certified copy of a vital record filed in this state is subject to a fine of not more than ten thousand dollars (\$10,000) or imprisoned not more than five (5) years, or both (Arkansas Statues 20-18-105).

Please PRINT the name and address of the person receiving the birth certificate below:

#### COPIES AND PAYMENT

- 1<sup>st</sup> copy costs \$12
- Each additional copy of the same record costs \$10
- NOTE: If ADH Vital Records does not find the birth record requested, the \$12 search fee will be kept as a search charge.
- Payment MUST be submitted with application.

## You can obtain a birth record four ways:

**Online:** Go to ar.gov/vitalrecords. A non-refundable \$5.00 processing fee and a \$1.85 identity verification fee will apply in addition to any expedited shipping options selected. Pay by debit or credit card.

**Telephone:** Call toll-free at (866) 209-9482. Payment of service fee, certificate fee, and charges for any expedited shipping options may be made by debit or credit card (Visa, MasterCard, Discover, or American Express).

**Walk-in:** Visit the Vital Records Office at 4815 W, Markham St. Little Rock, AR 72205. Orders are accepted for same day issuance from 8:00 am until 4:15 pm, Monday through Friday.

Mail: Include: 1) Application, 2) Copy of photo ID, and 3) check or money order (DO NOT SEND CASH) payable to:

**Arkansas Department of Health** 

Number	of Copies Requested	
Amount	Enclosed \$	

Mail to: Arkansas Department of Health

4815 W. Markham St., Slot 44 Little Rock, AR 72205