



Arkansas Department of Health  
Office of Vital Records

BIRTH CERTIFICATE APPLICATION

Date \_\_\_\_\_

Only Arkansas births are recorded in this office. Prior to February 1, 1914, only a limited number of birth records were filed.  
Mail this application, a copy of your photo ID and your payment to the Arkansas Department of Health at the address in the payment section below.  
**Please allow 7-14 days for processing.**

**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
3.	Place of Birth	City or Town		County	State	
		Name of Hospital or Street Address				
4.	Full Name of Father	First Name	Middle Name	Last Name		
5.	Full Maiden Name of Mother (Name Before Marriage)	First Name	Middle Name	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**

Signature

Contact Number

Email 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)

**Walk-in:** You may obtain a certified copy of the birth record by coming to the Vital Records Office at 4815 W. Markham St., Little Rock, AR 72205.

Orders are accepted for same day issuance from 8:00 a.m. until 4:15 p.m.

Monday through Friday.

**Please PRINT the name and address of the person to receive this request below**

**COPIES AND PAYMENT**

- 1<sup>st</sup> copy cost \$12 \_\_\_\_\_
- Each additional copy of the same record cost \$10 (how many copies) \_\_\_\_\_

**NOTE: If ADH Vital Records does not find the birth record requested, a \$12 fee will be kept as a search charge.**

Payment (by check or money order only) must be submitted with application. **DO NOT SEND CASH**

Send: 1) Application, 2) Copy of photo ID, and 3) check or money order, payable to:

**Arkansas Department of Health**

**Amount Enclosed \$ \_\_\_\_\_**

**Mail to: Arkansas Department of Health  
4815 W. Markham St., Slot 44  
Little Rock, AR 72205**

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 Statutes 20-18-105).