



Instructions for Birth Certificate Order Form

Carefully read these instructions before completing and submitting the Birth Certificate Order Form. Chapter 70.58A RCW and Chapter 246-491 WAC requires all applicants to be a qualified applicant, provide identity and proof of eligibility documentation, and provide required information to order a birth certificate.

Checklist for completing the Birth Certificate Order Form:

- ☐ Complete all fields on the birth certificate order form, sign, and date
- ☐ A copy of your identity document(s)
- ☐ A copy of your proof of eligibility document(s)
- ☐ Check or money order made payable to CDHD
- ☐ Send the order form, all documents, and nonrefundable payment to:

Chelan-Douglas Health District
Vital Statistics
200 Valley Mall Pkwy
East Wenatchee, WA 98802

What is a qualified applicant?

A qualified applicant is a person who is eligible to receive a certificate.

Who are the qualified applicants for a birth certificate?

Qualified applicants for a birth certificate are: Self, Spouse/Domestic Partner, Child, Parent, Stepparent, Stepchild, Sibling, Grandparent, Grandchild, Great Grandparent, Legal Guardian, Legal Representative, Authorized Representative, or Government Agency or the Courts (only for official duties).

Are you one of the qualified applicants listed above to the birth certificate you are requesting?

If yes, continue. You will need to provide identity and proof of eligibility documentation.

****If you are not one of the listed above, STOP. You will not receive a WA State birth certificate****

What is proof of eligibility documentation?

Proof of eligibility documentation are documents that link you to the requested birth certificate.

1. If you are listed on the record and your identity documentation sufficiently links you to the record (i.e. self or parents), your proof of eligibility requirement is met.
2. If you are not listed on the record or your identity documentation doesn't sufficiently link you to the record, you must provide additional documentation to prove eligibility.

What documents will Chelan-Douglas Health District accept to prove eligibility?

CDHD will accept the following documents to prove eligibility:

- Copies of vital records such as certifications of birth, death, marriage, and divorce from this or another jurisdiction that link you to the requested record
- Copies of certified court orders from a court of competent jurisdiction linking you to the record (i.e. legal guardian)
- Document or letter from a government agency or courts stating the certification will be used in the conduct of official duties (for government and court officials only)

View the [Proof of Eligibility \(PDF\)](#) for examples of how to prove qualifying relationship.



Chelan-Douglas Health District
200 Valley Mall Pkwy
East Wenatchee, WA 98802
509-886-6400

What identity documentation will CDHD accept?

CDHD will accept a copy of:

- One government issued identity document (must contain photo, full name, and date of birth) that is current or expired less than 60 days; or
- If you do not have a government issued identity document, then at least two alternate documents from the alternate list. The alternate documents must contain matching first and last names and addresses, or in combination contains full name, date of birth, and photograph.

View the list of [acceptable identity documentation](#).

What information is required?

The following information is required as it appears on the birth certificate:

- First, middle, and last name of the subject of the record
- First and last name of all parents listed on the record
- Date of birth (month, date, year)
- City or county where the birth occurred

What if I cannot provide the required documents to prove eligibility, do not have identity documents from the acceptable list, or know the required information?

If you are unable to meet the requirements, you may submit a request for an exception. This process allows the applicant to explain why you are unable to provide the required documentation or information.

What address do I put on the order form?

The address you provide on the order form must be the address you are REGISTERED to receive mail at. If filling in the form by hand, please print clearly to avoid delay in processing.

What form of payment is accepted?

We accept checks or money orders for requests mailed to CDHD. Make sure your check or money order is made payable to CDHD.

Important note: no refunds will be given if a record could not be located or the documentation you provided did not prove you were eligible to receive a birth certificate.

Helpful tip: To confirm that CDHD has received your order over the phone, we need:

- For Checks: Check number, date it was cashed (check with your banking institution before calling CDHD), and name on the check
- For Money Orders: Money order number and date it was cashed (to find this date call the number provided on your money order receipt)

For more information about vital records, please visit our website at:

<https://cdhd.wa.gov/birth-and-death-certificates/>

or DOH website at:

<https://www.doh.wa.gov/LicensesPermitsandCertificates/BirthDeathMarriageandDivorce>.

To request this document in another format, call 1-800-525-0127.

Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov



Chelan-Douglas Health District Birth Certificate Application

Make checks or money orders payable to CDHD.

Send mail-in orders to:

Chelan-Douglas Health District
200 Valley Mall Parkway
East Wenatchee, WA 98802

We are not responsible for lost mail.

No Refunds

PLEASE PRINT CLEARLY. We issue certificates for births that occurred in **Washington only**. For newborns, allow 3-4 weeks after the birth of the baby. Requests are processed Monday through Thursday. Our office is closed on Friday. **For more information, visit www.cdhd.wa.gov or call (509) 886-6400.**

☐ Certified Copy - \$25 ☐ Noncertified Informational Copy - \$25

****Refunds are not available if a customer does not provide additional information within the 30-day window of if a record cannot be found****

Applicant Information

How would you like to receive the order? ☐ Mail or ☐ Pick-up

Name of person ordering certificate(s)

Daytime Phone

Address Sending Certificate(s) To

City

State

Zip Code

Email (Optional)

To receive a birth certificate, you must indicate your relationship to the registrant below and sign the sworn statement that you are authorized to receive the certificate.

Select Relationship:

☐ SELF

☐ PARENT

☐ SIBLING

☐ SPOUSE/DOMESTIC PARTNER

☐ AUTHORIZED REPRESENTATIVE

☐ GREATGRANDPARENT

☐ STEPPARENT

☐ GRANDPARENT

☐ LEGAL GUARDIAN

☐ GOVERNMENT AGENCY

☐ CHILD

☐ STEPCCHILD

☐ GRANDCHILD

☐ LEGAL REPRESENTATIVE

☐ COURTS

Birth certificate request

Number of Certificates Requested _____

Full First Name on Record

Full Middle Name

Full Last Name

Date of Birth

City of Birth

County of Birth

Facility of Birth (Home, Hospital, etc.)

Mother/Parent Birth Name: First Name

Full Middle Name

Birth/Maiden Last Name

Father/Parent Birth Name: First Name

Full Middle Name

Birth/Maiden Last Name

☐ Not Listed

Did Adoption ever take place? ☐ Yes ☐ No

I declare under penalty of perjury under the laws of the state of Washington that the information I have provided is true and correct. Further, be advised that willfully providing a false statement to vital records for a certificate is a gross misdemeanor under Washington law, RCW 70.58A.590(2).

Signature (Applicant)

Date signed: (MM/DD/YYYY)

Payment Options

Total Number of Copies: _____ x \$25 = \$ _____

Expedited Fee (Same day service): ☐ x \$10 = \$ _____

*Mailing Fee – Regular Mail: ☐ x \$3 = \$ _____

*Mailing Fee – Priority Mail: ☐ x \$9 = \$ _____

TOTAL AMOUNT DUE: = \$ _____

*One shipping fee per address regardless of # of orders

Office Use Only

Official Use Only

Date: _____ Certificate Number(s): _____

☐ Regular / Priority Mail / UPS ☐ Newborn/Paternity Pending ☐ No Match/UTI ☐ Stat