

Office of Vital Records

7190 Colorado Blvd., Suite 170,
Commerce City, CO 80022

Website: www.adamscountyhealthdepartment.org

Email: vitalrecords@adamscountycolorado.gov

Tel: (720) 200-1401



Staff Use Only:

v. 12/2025

DCN: _____

Staff: _____ Date: _____

Birth Certificate Application

Requestor please include the following for processing:

Completed application

Required ID

(see below or visit our website for additional options)

Payment

Tangible interest documents

(if applicable)

Requestor Information

Print name of person making request:		Daytime Phone:	
Mailing Address:		City	State Zip
Your relationship to person named on certificate <i>(Proof needed if your name is not listed on certificate)</i> :			
<input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Legal Representative <input type="checkbox"/> Other _____			
Reason for Request <i>(Choose one option)</i> :			
<input type="checkbox"/> Newborn <input type="checkbox"/> Travel/Passport <input type="checkbox"/> Records <input type="checkbox"/> School <input type="checkbox"/> Insurance <input type="checkbox"/> Social Services <input type="checkbox"/> Employment <input type="checkbox"/> Social Security <input type="checkbox"/> Other: _____			

Registrant Information

Full Name at Birth	First			Middle		Last	Suffix
	Month	Day	Year	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	Is this Person Deceased? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, date: ____/____/____ State where Death Occurred: _____ <i>(Please provide certified copy of death certificate)</i>		
Place of Birth	City			County		State COLORADO ONLY	
Full Name of Mother or Parent A	First			Middle (Prior to First Marriage)		Last (Prior to First Marriage)	Suffix
Full Name of Father or Parent B	First			Middle (Prior to First Marriage)		Last (Prior to First Marriage)	Suffix

Pursuant to Colorado Revised Statutes, 1982, 25-2-118 and as defined by Colorado Board of Health Rules and Regulations, applicant must have a **direct and tangible** interest in the record requested. The penalties for obtaining a record under false pretenses include a fine of not more than \$1,000.00 or imprisonment in the county jail for not more than one year or both such fine and imprisonment (CRS 25-2-118)

By signing in this box, I have read and understood that there are penalties for obtaining a record under false pretenses.

Today's Date

**SIGN
HERE**

Primary ID Listing (at least one) or visit our website for additional ID options

- Alien Registration Receipt or Permanent Resident Card (INS I-151 or I-551)
- Certificate of US Citizenship (N-560 or N-561)
- City of Denver/Denver County/Pueblo County Jail Temporary Inmate ID
- CO Department of Corrections ID Card
- CO Department of Human Services Youth Corrections ID
- CO Temporary Driver's License/State ID (within 30 days)
- Employment Authorization Card (I-766)
- Foreign Passport
- Government Work ID (US)
- Job Corps ID Card

- International Driving License or Photo ID Card (Issued by Country)
- Photo Driver License/ID card (DMV - US)
- School, University, or College ID Card (US - Current school year)
- Temporary Resident Card (I-688, I-688A, or I-688B)
- US B1/B2 Visa Card PLUS I-94
- US Certificate of Naturalization (N-550 or N-570 w/Photo)
- US Citizenship ID Card (I-197)
- US Merchant Mariner Card (w/Photo)
- US Military ID Card
- US Passport Book/Card

For payment by email, fax or mail, enter card info below or make checks/money orders payable to Adams County Vitals

Card Type: ☐ Visa ☐ MasterCard ☐ Discover ☐ AMEX

Cardholder name: _____

Cardholder Signature: **SIGN HERE** _____

Card Number: _____

Expiration Date: ____/____ CVV: ____

Order Quantity

Number of certificates _____

Cost of first certificate **\$ 25.00**

Additional certificate(s) \$20 ea. \$ _____
(issued on the same day)

UPS \$25.00 - 2 business day delivery \$ _____
(optional)

Total charges \$ _____