

WISCONSIN BIRTH CERTIFICATE APPLICATION
 (for Mail or In-Person Requests)

TYPE or PRINT.

PENALTIES: Any person who wilfully and knowingly makes a false application for a birth certificate is guilty of a Class I felony [a fine of not more than \$10,000 or imprisonment of not more than 3 years and 6 months, or both, per s. 69.24(1)].

I. APPLICANT INFORMATION	The information in Section I is about the person completing this application.					
	YOUR CURRENT NAME - First		Middle	Last	YOUR DAYTIME TELEPHONE NUMBER	
	YOUR STREET ADDRESS (<i>CANNOT be a P.O. Box address</i>)			Apt No	MAIL TO ADDRESS (<i>if different</i>)	
	City, Village, or Township		State	ZIP Code	City	State
	E-Mail Address					
TYPE OF CURRENT VALID PHOTO ID <small>(See item 4 on page 2.)</small>		PHOTO ID NUMBER		STATE OF ISSUANCE	EXPIRATION DATE	

II. APPLICANT RELATIONSHIP TO PERSON NAMED ON THE CERTIFICATE	According to Wisconsin Statute, a CERTIFIED copy of a birth certificate is only available to those with a "direct and tangible interest" (<i>categories A – E below.</i>) (See item 1 on page 2 for more details.) Check ONE box which indicates YOUR RELATIONSHIP to one of the PERSONS NAMED on the birth certificate.					
	<input type="checkbox"/> A. I am the PERSON NAMED on the birth certificate. <input type="checkbox"/> B. I am the PARENT of the person named on the record and my parental rights have NOT been terminated. NOTE: In the case of a NON-MARITAL child, father's rights MUST have been established by a court or paternity affidavit BEFORE he (or the paternal grandparents as shown in Item D) may obtain a copy of the record under this category. <input type="checkbox"/> C. I am a member of the immediate family of the PERSON NAMED on the birth certificate. (<i>Only those listed below qualify as immediate family.</i>) NOTE: Grandchildren, step-parents, step-children and step-brothers/step-sisters may only obtain certified copies as section II, categories C – E. CHECK ONE. <input type="checkbox"/> Current Spouse <input type="checkbox"/> Brother / Sister <input type="checkbox"/> Grandparent <input type="checkbox"/> Child <input type="checkbox"/> Current Domestic Partner (registered in the Wis. Vital Records System) <input type="checkbox"/> D. I am the legal custodian or guardian of the PERSON NAMED on the birth certificate. (<i>Legal proof is required. See item 1 on page 2.</i>) <input type="checkbox"/> E. I am a representative authorized , in writing, by any of the aforementioned (categories A - C). (<i>The written and notarized authorization must accompany this application. See item 1 on page 2.</i>) Specify whom you represent: _____ <input type="checkbox"/> F. I can demonstrate that the information from the birth certificate is necessary for the determination or protection of a personal or property right for myself/my client/my agency. (<i>Proof is required.</i>) Specify your interest: _____					
PURPOSE FOR WHICH CERTIFICATE IS REQUESTED (<i>Specify. This information will assist us in processing your request.</i>)						

III. FEES	CHECKS, CASH OR MONEY ORDER ONLY ACCEPTED FOR PAYMENT (NO CREDIT/DEBIT CARDS)					
	FEE IS NOT REFUNDABLE IF NO RECORD IS FOUND. CANCELLATION REQUESTS ARE NOT ACCEPTED. <input checked="" type="checkbox"/> Search Fee (includes one copy, if found) \$ 20.00 <u>20.00</u> <input type="checkbox"/> Each additional copy of the same record, issued at the same time as the first copy _____ X \$ 3.00 _____ <div style="text-align: right; margin-right: 50px;"><small>number of additional copies</small></div> <p align="right">TOTAL _____</p>					

MAKE CHECK PAYABLE TO : CITY OF WEST ALLIS Mail to: 7120 West National Avenue, West Allis, WI 53214

Be sure to include (1) Completed application (2) a photocopy of your current/valid picture ID (3) any additional proof or authorization required (4) self-addressed business-size envelope and (5) check or money order

IV. BIRTH RECORD INFORMATION	BIRTH NAME - First		Middle	Last Name as it appears on the birth certificate	
	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	BIRTHDATE (Month / Day / Year)	PLACE OF BIRTH – County	PLACE OF BIRTH – City, Village, or Township	
	Mother's First Name	Mother's Middle Name	Mother's " Maiden Name " (Birth Last Name)		
	Father's First Name	Father's Middle Name	Father's Last Name as it appears on the birth certificate		

I hereby attest that the information provided on this application is correct to the best of my knowledge and belief and that I am entitled to copies of the requested birth certificate in accordance to the categories listed above.

SIGNATURE - Applicant (person named in section I who is completing this application)	Date Signed (Month / Day / Year)
--	----------------------------------

WISCONSIN BIRTH CERTIFICATE APPLICATION INSTRUCTIONS

1. What is a “certified” copy of a birth certificate?

A **certified** copy of a birth certificate issued by the Local Vital Records Office will have a raised seal, will show the signature of the Local Registrar, and will be printed on security paper. A certified copy may be required to obtain a state-issued driver’s license or identification, for travel to foreign countries, to obtain a passport, or for benefit purposes.

State law restricts who may obtain a **certified** copy of a birth certificate. A **certified** copy can only be issued to those people with a “direct and tangible interest” (section II, categories A – E) which means the following people:

- The person named on the birth certificate (section II, category A).
- An immediate family member, defined as current spouse, current domestic partner (Declaration of Domestic Partnership registered in the Wis. Vital Records System under Chapter 770, Wis. Stats.), child, or parent (whose name is on the birth certificate and whose parental rights have not been terminated), brother/sister, or grandparent of a subject of the record (section II, category B).
- NOTE: Grandchildren, step-parents, and step-children can only obtain certified copies as in section II, categories C – E.
- The legal custodian or guardian of the person named on the birth certificate. Legal proof, e.g., a court order of custody or guardianship, is required (section II, category C).
- A person authorized in writing by one of the above. A written and notarized authorization must accompany the application and the authorization must clearly state the relationship of the authorizing party to the subject of the record (section II, category D).
- A person who can demonstrate that the birth certificate is required to determine or to protect a personal or property right (section II, category E). Proof is required.

If you do not meet one of the above criteria, you cannot receive a **certified** copy of the birth certificate.

2. Limitations on access to certain birth certificates

Only persons with a “direct and tangible interest” (categories A – E) may obtain **certified copies** of those types of birth certificates listed directly above.

3. How long will it take to process my request?

Copies of birth certificates are available from the Local Vital Records Office no less than 3 weeks from the date of the birth.

- **Applying in Person**
 - In-person requests for certified copies of birth certificates are usually completed within 2 business hours of application, if the birth certificate is on file.
- **Applying by Mail**
 - Requests for **certified** copies of birth certificates may take up to 1 week plus mail time to complete.

4. What identification is required when applying for a certified or uncertified copy of a birth certificate?

A photocopy of the applicant’s current ID as listed below must be submitted with **all** mail applications. A current ID as listed below is required when applying in-person.

At least one form of ID must show your current name and current address. Expired cards or documents will not be accepted.

The acceptable forms of identification are:

One of these:

State issued driver’s license or ID card
US government issued photo ID
US or Foreign passport
Tribal or Military ID card

OR

Two of these:

Bank/Earnings statement
Current, dated, signed lease
Health insurance card
Current utility bill or traffic ticket
Vehicle registration/title

**If you have questions regarding this form, please call 414-302-8633
or visit our website at <http://www.westalliswi.gov/vitalrecords>**