APPLICATION FOR AN IOWA VITAL RECORD

OFFICE USE ONLY
Application ID _____
Security # _____
_____

- **Submit all the following:**
  - ❑ **Completed application for an IOWA birth, death or marriage record;**
  - ❑ **$15 fee payable in U.S. funds;**
  - ❑ **Copy of current government issued photo ID;**
  - ❑ **SIGNATURE MUST BE NOTARIZED WHEN MAILING THE REQUEST.**

DID THE EVENT OCCUR IN IOWA? If yes, continue.

If no, you must apply in the state the event occurred.

1. **EVENT TYPE** (Check one) ❑ BIRTH ❑ DEATH ❑ MARRIAGE ❑ FETAL DEATH

2. **PERSON'S NAME AS IT APPEARS ON THE RECORD** _____
   FIRST MIDDLE, if any LAST (Surname)

   2a. **If for Marriage record,** SPOUSE'S NAME _____
   FIRST MIDDLE, if any LAST (Surname)

3. **DATE OF EVENT** (Birth, Death, or Marriage) – BE SPECIFIC – Month, Day, Year _____

4. **PLACE OF EVENT – ONLY EVENTS THAT OCCUR IN IOWA** _____
   (City and/or County)

5. **PARENT'S FULL NAME PRIOR TO ANY MARRIAGE –** First, Middle, Last (Surname) _____

6. **2ND PARENT'S FULL NAME –** First, Middle, Last (Surname) _____

7. **(Birth Only)** WAS THE MOTHER MARRIED AT THE TIME OF CONCEPTION OR BIRTH? ❑ Yes ❑ No ❑ Unknown

8. **LEGAL ACTIONS TO BIRTH RECORD** ❑ None ❑ Adoption ❑ Paternity Establishment ❑ Legal Change of Name

   8a. **IF A LEGAL ACTION OCCURRED, LIST PREVIOUS NAME** (on birth certificate) _____
   Marriage does NOT change the birth certificate.

9. **PURPOSE FOR COPY** _____ 10. **BIRTHDATE OF APPLICANT** _____

11. **RELATIONSHIP OF PERSON RECEIVING THIS COPY TO PERSON NAMED ON THE RECORD** _____

12. **NAME AND ADDRESS OF PERSON TO RECEIVE THIS COPY:** (MUST BE AGE 18 OR OLDER & ENTITLED TO THE RECORD)

    12a. **Name of Applicant/Recipient** _____

    12b. **Street address and P.O. Box** (if any) _____

    12c. **City, State and Zip Code** _____

13. **THE CERTIFICATE IS TO BE** (Check one) ❑ Mailed ❑ Picked up (for in-person requests only)

14. **THE FEE IS $15.00** and one certified copy is issued.
    Each additional copy of the same record is $15.00. Indicate the number of copies of this record you need. _____

15. **THIS REQUEST PAID BY** (Check one) ❑ Check ❑ Money Order ❑ Cash ❑ No Fee Exchange 16. **AMOUNT ENCLOSED** _____

17. **APPLICANT'S NAME** (Print clearly) _____ 18. **DAYTIME PHONE #** _____
    (Include area code)

I certify that the information provided on this application is accurate and complete to the best of my knowledge and that I have legal entitlement to a certified copy of this record. I have signed below in front of a notary public or an Iowa registrar of vital records.

19. **APPLICANT'S SIGNATURE** _____ 20. **DATE** _____

APPLICANT'S NAME AS IT APPEARS ON PHOTO I.D. *(Print clearly)* _____
(SEAL)

State of _____ County of _____ ss

Signed and affirmed in my presence on this ____ day of _____ , _____.

_____ , My commission expires: _____
Notary Public Signature

Administrative Use Only

I.D. _____

Initials _____

Do not use any unapproved third party vendor to obtain this form. Do not pay a fee for this form.
This form is available to print at no cost at https://idph.iowa.gov/health-statistics

Information about requesting a certified copy of an IOWA Birth, Death or Marriage Record

What records are available?

In Iowa, vital record registration began July 1, 1880. Event must have occurred in IOWA. Records older than July 1, 1880 are not on file.

Where are records held?

Original vital records that were registered are on file with the Iowa Department of Public Health, Bureau of Health Statistics. Vital records are also available for request at local county registrar offices in Iowa.

What records are open for public inspection?

The state vital record system is closed to public inspection. However, birth, marriage and death records may be inspected as of right under Iowa Code section 22 when in the custody of the county registrar. IAC 144.43

The following is required when applying for a certified copy of an Iowa vital record:

1) Completed application that is legible and clearly identifies the event record and establishes entitlement to the record requested.
2) Applicant's current government issued photo identification (copy if sent by mail).
3) Payment in the amount of $15 for EACH certified copy requested. Fees payable in U.S. funds by check or money order. Cash accepted in person ONLY.
4) SIGNATURE MUST BE NOTARIZED ON THE APPLICATION WHEN SUBMITTING VIA MAIL.

Who is entitled to the record?

Entitled persons include the person named on the record or that person's spouse, children, legal parents, grandparents, grandchildren, siblings, or legal representative or guardian. Legal guardians, legal representatives, and siblings must also provide additional proof of entitlement.

What is the fee?

The fee for a certified copy of a vital record in Iowa is $15 each. Fees are payable in U.S. funds by check or money order to the issuing registrar's office. Fees must be paid at the time of the application.

What is the process to exchange the small wallet-sized birth cards?

Any pink/blue wallet sized birth certificates issued between 1993 and 2009 can be exchanged for no fee. Follow all instructions above for applying for a vital record in Iowa. The original pink/blue wallet birth certificate may be returned along with a completed application and proof of ID (current government issued photo identification) to any issuing office in Iowa. If the wallet-sized birth certificate is not exchanged, applications must be sent to the state office at the address listed below.

What if the order is not received in the mail?

If the requested documents are not received within 30 days, contact the issuing office. Requested documents cannot be replaced at no fee after 90 days of issuance.

WAYS TO ORDER FROM THE IOWA DEPARTMENT OF PUBLIC HEALTH OR COUNTY RECORDER

Telephone: Customers may call VitalChek **toll-free at 1-866-809-0290** from 6:00 am CST through 7:00 pm CST, Monday through Friday, except for holidays. An additional processing fee will apply. Customers may call the bureau directly at 515-281-4944 to speak to state staff.

In-person: Applications may be made in-person at the Bureau of Health Statistics, 321 E. 12th Street, Des Moines, Iowa, from 7:00 a.m. to 4:45 p.m., Monday through Friday, except for state-observed holidays. All application requirements noted above will apply. Applications may also be made in person at the county recorder offices. Visit https://idph.iowa.gov/health-statistics for a full list of records held at county recorder offices.

Postal service: Written requests and fees may be mailed to the address below. All application requirements noted above will apply.

Genealogy requests may take up to 60 business days for processing, regardless of the method of application, and will be mailed to applicants.
Commemorative Certificates – Information regarding commemorative certificates is available at idph.iowa.gov/health-statistics.

Iowa Department of Public Health
Bureau of Health Statistics
Lucas State Office Building
1st Floor, 321 E. 12th Street
Des Moines, Iowa 50319-0075

SEE OTHER SIDE FOR AN APPLICATION FORM.
FORM MAY BE USED FOR APPLICATION AT THE BUREAU OF HEALTH STATISTICS OR COUNTY RECORDER OFFICES.