

Birth Certificate Request

Use this form to order a birth certificate for a person born in Minnesota. *It's illegal to give false information to obtain a vital record, and it may subject you to fines, jail time, or both (Minnesota Statutes 144.227)*

Information to find the requested birth record						<i>Minnesota Rules 4601.2600</i>
Child/Subject	Child/subject first name		Child/subject middle name		Child/subject last name	
	Date of birth (MM/DD/YYYY)	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	Minnesota city of birth		Minnesota county of birth	State of birth <div style="text-align: center; font-size: 1.5em; font-weight: bold;">MN</div>
Parents	Parent one first name		Parent one middle name		Parent one last name	
	Parent two first name		Parent two middle name		Parent two last name	
				Last name before 1 st marriage		
				Last name before 1 st marriage		
REQUIRED – Requester information						<i>Minnesota Rules, part 4601.2600</i>
Requester full name				Date of birth (MM/DD/YYYY)		Daytime phone (10-digit)
Requester street address				Apt/Unit #		Email
				City		State
						ZIP Code
REQUIRED — Mark the boxes that describe your relationship to the subject of the record						<i>Minnesota Statutes 144.225</i>
Marital status is important. Records of children born to married parents are “public”. That means that the certificate is available to those listed in items 1 – 18 below. Records of children born to single mothers are “confidential” unless the mother chose to make the record public at the time of birth. Only the persons listed below in items 19 – 23 may obtain confidential birth certificates.						
<i>“Public” birth records are available to individuals who meet any of the legal requirements in items 1-18</i>						
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;">1. <input type="checkbox"/> A parent named on the subject’s record</div> <div style="width: 33%;">2. <input type="checkbox"/> A grandparent of the subject</div> <div style="width: 33%;">3. <input type="checkbox"/> A great grandparent of the subject</div> <div style="width: 33%;">4. <input type="checkbox"/> A child of the subject</div> <div style="width: 33%;">5. <input type="checkbox"/> A grandchild of the subject</div> <div style="width: 33%;">6. <input type="checkbox"/> A great-grandchild of the subject</div> <div style="width: 33%;">7. <input type="checkbox"/> Spouse of the subject (You must be the current spouse)</div> <div style="width: 33%;">8. <input type="checkbox"/> I am the subject; I am requesting my own birth record</div> <div style="width: 33%;">9. <input type="checkbox"/> The legal custodian, guardian, or conservator of the subject (we need a copy of the court order that names you)</div> <div style="width: 33%;">10. <input type="checkbox"/> The health care agent for the subject (we need a valid “health care power of attorney” document)</div> <div style="width: 33%;">11. <input type="checkbox"/> Subject’s personal representative who requires the birth certificate for administration of the subject’s estate</div> <div style="width: 33%;">12. <input type="checkbox"/> Successor of a deceased subject who requires the birth certificate for administration of the subject’s estate</div> <div style="width: 33%;">13. <input type="checkbox"/> Person who demonstrates a need for a birth certificate to determine or protect a personal or property right</div> <div style="width: 33%;">14. <input type="checkbox"/> Adoption agency — to complete post-adoption search (we need a copy of your Employee ID)</div> <div style="width: 33%;">15. <input type="checkbox"/> Local/state/tribal or federal governmental agency (we need a copy of your Employee ID) (Best practice: wait for family to verify the record).</div> <div style="width: 33%;">16. <input type="checkbox"/> Attorney – I represent the subject, or a person listed in items 1-14 above.</div> </div> <div style="margin-top: 5px;"> My Minnesota Attorney License Number is: _____ </div> <div style="text-align: right; margin-top: 5px;"> If you are a NON-Minnesota attorney, attach a copy of your attorney license. </div> <div style="margin-top: 5px;"> 17. <input type="checkbox"/> Pursuant to a valid copy of a U.S. court order (not a subpoena) releasing the certificate 18. <input type="checkbox"/> I have a signed statement from a person above; it specifies the subject’s full name, date of birth, parents’ names, the signer’s relationship to the subject of the record and it authorizes me to obtain the certificate. </div>						
<i>“Confidential” birth records are available only under the conditions, or to the person, in items 19-23</i>						
19. <input type="checkbox"/> Parent named on the subject’s record 20. <input type="checkbox"/> The legal custodian, guardian, or conservator of the subject (you need a copy of a court order naming you) 21. <input type="checkbox"/> The subject, when 16 years old or older 22. <input type="checkbox"/> Representatives of Minnesota programs that administer child support, medical assistance, MinnesotaCare, and services under Minnesota Statutes, sections 124D.23; Minnesota Statutes, chapter 260E; and, tribal child support programs, Minnesota Statutes, section 144.225, subdivision 2, paragraph (f). (we need a copy of your Employee ID) 23. <input type="checkbox"/> Pursuant to a valid copy of a U.S. court order (not a subpoena) releasing the certificate						

Requester's name:			
Sign this form in front of a Notary Public if you are applying by MAIL			<i>Minnesota Rules 4601.2600</i>
<i>I certify that the information provided on this form is correct and complete to the best of my knowledge.</i>			
Requester signature			
Notary	Signed or attested before me on: ____ day of _____, 20__		Notary stamp/seal
	Printed name of notary public		
	Notary public signature	My commission expires:	
Fees and record request			Fee
Certified Birth Certificate (first copy)			\$26
Additional copies		# of copies	\$19 each
Veteran's Affairs (VA) certificate (for VA purposes only)		1 copy	\$0
Total due			
Payment method			
<input type="checkbox"/> Check		Check #	Make check or money order payable to Benton County Recorder. DO NOT SEND CASH. Checks returned for non-payment will result in a \$30 charge to you. You could also face civil penalties (<i>Minnesota Statutes 604.113</i>).
<input type="checkbox"/> Money order		Money order #	
Send your request and payment to:		Questions?	
Benton County Recorder 531 Dewey Street PO Box 129 Foley, MN 56329		Contact Benton County Recorder at recorder@co.benton.mn.us or 320-968-5037	