

Arizona Vital Records Request for Copy of Birth Certificate

INFO	For Office Use Only—State File Number/Serial Number			Request ID		
Please visit the State Office of Vital Records website www.azhealth.gov for the following information: <ul style="list-style-type: none"> Fees Locations, office hours, and availability of services Eligibility requirements and acceptable identification Correction, amendment, and registration information Download forms Telephone: 602-364-1300 Apply Online: www.VITALCHEK.com (Refer to website for their current fees)			CUSTOMER CHECKLIST <ul style="list-style-type: none"> <input type="checkbox"/> Clear photocopy of the front and back of your valid, signed government photo ID OR have your signature notarized <input type="checkbox"/> Proof of relationship enclosed if required (birth certificates, certified court documents, etc) <input type="checkbox"/> Sign the application <input type="checkbox"/> Include self-addressed stamped envelope <input type="checkbox"/> Correct fee enclosed 			
PAYMENT INFO	Today's Date	# of Certified Copies Requested	Purpose of Request		Payment Method	
	Payment Information Card Number _____ - _____ - _____ - _____ Card Expiration Date ____ / ____ <input type="checkbox"/> Visa <input type="checkbox"/> MC					
	Signature of Cardholder— Must provide photocopy of valid government issued identification if cardholder is not the applicant.				Amount to be Charged \$ _____	
BIRTH CERTIFICATE INFORMATION	Date of Birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Name on Birth Certificate			
			First	Middle	Last	
	Town/City of Birth		County	Hospital		
	Mother's/Parent's First Name	Middle	Last Name prior to first marriage		Date of Birth	State (if US) or Country of birth
	Father's/Parent's First Name	Middle	Last		Date of Birth	State (if US) or Country of birth
	Do you belong to an Arizona Tribe? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please specify tribe.			
PERSON REQUESTING	Applicant's Full Name—Printed			Applicant's Signature—Required		
	First	Middle	Last			
	Mailing Address					
	Street	City		State	Zip	
Daytime Telephone Number		Email Address				
Your Relationship to Person on Certificate—Check One *PROOF of relationship MUST be provided if you are NOT named on the certificate. <input type="checkbox"/> Parent <input type="checkbox"/> Self <input type="checkbox"/> Brother/Sister <input type="checkbox"/> Grandparent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Spouse <input type="checkbox"/> Gov't Agency <input type="checkbox"/> Other						
NOTARY AREA	State of _____ County of _____					
	On this _____ day of _____, 20__ before me personally appeared _____ (name of signer), whose identity was proven to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledges that he/she signed the above document.					
	Notary Signature _____ My Commission Expires _____					
	Affix Seal/Stamp Here					

PARTICIPATING OFFICE LOCATIONS

The State Office of Vital Records does not provide walk-in service for birth and death certificate issuance. Services available at the State Office of Vital Records by appointment only are delayed birth registration, adoptions, foreign born, putative father, and amendments and corrections for births that occurred prior to 1997 and deaths that occurred prior to 2008.

For walk-in customer service, please visit your nearest local county vital records office providing walk-in service as listed below.

Please note payment types accepted at various office locations: Cash **(C)** - in person only, Money Order/Cashier's Check **(MO)**, Personal Check **(PC)**, Credit Cards **(CC)**, Debit Cards **(DC)**.

Please visit <http://azdhs.gov/vital-records/> or call for the most current fee schedule for each office.

State Office of Vital Records

1818 W. Adams St.
Phoenix, AZ 85007
(602) 364-1300
(C) (MO) (CC)

Mail to: PO Box 6018

Phoenix, AZ 85005

**Certified Copies of Birth and Death
Certificates are Available by Mail Only**

Apache County Public Health Services District

75 W. Cleveland St.
Johns, AZ 85936
(928) 337-7668
(MO) (C)

Mail to: PO Box 697

St. Johns, AZ 85936

Cochise County Health Department

4001 E. Foothills Dr.
Sierra Vista, AZ. 85635
(520) 803-3925
(C) (MO) (DC)

Coconino County Health Department

2625 N. King St.
Flagstaff, AZ 86004
(928) 679-7272
(C) (MO) (PC) (CC)

Gila County Health & Emergency Services

Office of Vital Records
5515 S Apache Ave., Ste. 100
Globe, AZ 85501
(928) 402-8811
(C) (PC) (MO)

Graham County Health Department

820 W. Main
Safford, AZ 85546
(928) 428-4441
(C) (MO) (PC)

Greenlee County Health Department

Office of Vital Registration
253 5th St.
Clifton, AZ 85533
(928) 865-2601
(C), (MO)

Mail to: PO Box 936

Clifton, AZ 85533

La Paz County Vital Records Office

1112 Joshua Ave, Ste. 206
Parker, AZ 85344
(928) 669-1100
(C) (MO)

Maricopa County

Office of Vital Registration
3221 N. 16th St., Ste. 100
Phoenix, AZ 85016

Office of Vital Registration
3003 W. Thomas Rd., Ste. 200B
Phoenix, AZ 85017

Office of Vital Registration
4419 E. Main St., Ste. 105
Mesa, AZ 85205

Office of Vital Registration
1850 N 95th Avenue, Ste. 182
Phoenix, AZ 85037
(602) 506-6805 **(C)**
(MO) (CC)

For all Mail: P.O. Box 2111
Phoenix, AZ 85001

Mohave County Public health

County Administration Building Drop
Box in lobby:
700 W. Beale St.
Kingman, AZ 86401
Mail to: PO Box 7000
Kingman, AZ 86402
(928) 753-0748 **(C)**
(MO)

**Certified Copies of Birth Certificates are Available
by Mail Only or Drop Box**

Navajo County Health Department

117 E. Buffalo St.
Holbrook, AZ 86025
(928) 524-4750
(MO)

Pima County Health Department

Vital Records Office
3950 S. Country Club Road Ste. 100
Tucson, AZ 85714
(520) 724-7932
(C) (MO) (CC) (DC)

Pinal County Health Department

36235 N. Gantzel Rd.
San Tan Valley, AZ 85142 (520)
886-4670 / 1-800-231-8499 **(C)**
(MO) (CC)

Pinal County Health Department

41600 West Smith-Enke Rd.
Bldg. 15
Maricopa, AZ 85138
(520) 866-4261 / 1-800-231-8499
(C) (MO) (CC)

Mail to: PO Box 2945

Florence, AZ 85132
(Funeral Homes Only)

Santa Cruz County Health Services

2150 N. Congress Dr. Ste. 115
Nogales, Arizona 85621
(520) 375-7900
(C) (MO)

Yavapai County Health Department

1090 Commerce Dr.
Prescott, AZ 86305
(928) 771-3125

(C) (MO) (PC) (CC/DC)

**Certified Copies of Birth Certificates and Death
Certificates are Available by Mail Only**

Yuma County Health Services

Vital Records Department
2200 W. 28th St.
Yuma, AZ 85364
(928) 317-4530
(C) (MO)