

PLEASE FOLLOW THESE STEPS WHEN COMPLETING THE "Certified Copy of Birth Certificate Request":

1. Complete the following sections:

"Information to locate the requested birth record" = subject of record for which you are requesting the birth record

"Person completing this application - the requester" = person applying

"MANDATORY – Check the box that describes your relationship to the subject of the record"

Boxes 1-19 are for individuals who meet legal requirements to obtain Public records.

Boxes 20-24 are for birth certificates available only under the conditions or to persons named to obtain Confidential records.

- 2. Requester must sign their signature in front of a notary public and have document notarized.**
- 3. Requester must attach a clear photocopy of their VALID driver's license or state issued picture ID card.**

- 4. Fee: \$26.00 for a certified copy of a birth record**
(Additional copy of the same birth record \$19.00 = \$45.00 two certified copies of same record)

We accept bank issued Cashier's Check, Money Orders or *Debit or Credit Card payments.

*Please note there is a convenience fee to process debit or credit card payments.

Please make cashier's check or money order payable to: **Wadena County Recorder**

- 5. Mail to: Wadena County Recorder**
415 Jefferson Street South, Room 220
Wadena, MN 56482

If you need the birth record expedited, please enclose a prepaid, self-addressed priority mailer.

If you have any questions, please contact our office at 218-631-7622. Thank you!



Birth Certificate Application

Complete this form to order a certified copy of a Minnesota birth certificate.

The law requires you to provide information to order a birth certificate, *Minnesota Statutes, section 144.225, subdivision 7, and Minnesota Rules, part 4601.2600*. It is against the law to provide false information to get a birth certificate. You may be subject to fines, jail time or both. *Minnesota Statutes, section 144.227 and section 609.02, subdivisions 3 and 4*.

Information to locate the requested birth record

Subject	Subject's first name	Subject's middle name	Subject's last name	Name suffix	
	Subject's date of birth (mm/dd/yyyy)	<input type="checkbox"/> Female <input type="checkbox"/> Male	Subject's city of birth	Subject's county of birth	
Parents	Parent one - first name	Parent one - middle name	Parent one - last name	Last name before 1 st marriage	Name suffix
	Parent two - first name	Parent two middle name	Parent two last name	Last name before 1 st marriage	Name suffix

Person completing this application

Requester name			Requester date of birth (mm/dd/yyyy)		
Requester mailing address – Street		Apt/Unit #	City	State	ZIP
Requester daytime phone		Requester email			

United Parcel Service (UPS) will not deliver to PO boxes or APO addresses.

Information about birth certificates: Most Minnesota vital record information is public information. When a record is public, information and certificates are available to individuals who meet the legal requirements in items 1 - 19 below. Other vital record information is confidential. Data about the birth of a child to a woman who was not married to the child's father when that child was conceived or born are confidential, unless the mother chooses to make the record public when the birth is registered. When a record is confidential, information and birth certificates are restricted to those persons listed below in items 20 - 24.

MANDATORY — Check the boxes below that describe your relationship to the subject of the record:

Birth certificates available to individuals who meet any of the legal requirements in items 1-19 below (Public records)

1. A parent named on the subject's record
2. A grandparent of the subject
3. A great-grandparent of the subject
4. A child of the subject
5. A grandchild of the subject
6. A great-grandchild of the subject
7. Spouse of the subject (You must be the current spouse)
8. The subject of the vital record (I am requesting my own birth record)
9. Party responsible for filing the record (generally a health professional or birth attendant)
10. The legal custodian, guardian or conservator of the subject (a certified copy of a court order naming you is required)
11. The health care agent for the subject (health care power of attorney is required)
12. Subject's personal representative; a certified copy is needed to administer the estate
13. Successor of the subject (subject is dead); the certified copy is needed to administer the estate
14. Determination or protection of a personal or property right and proof that birth certificate is needed
15. Adoption agency — to complete post-adoption search (Employee ID is required)
16. Local/state/federal governmental agency (Employee ID is required)
17. Attorney – my Minnesota Attorney License Number is: _____ NON-Minnesota license? Affix a copy
18. Pursuant to a valid, certified copy of a U.S. court order (not a subpoena) releasing the certificate
19. Authorized representative listed in 1-18 above (a signed statement from the person authorizing release to you is required)

Birth certificates available only under the conditions or to the persons named below (Confidential records)

20. Parent named on the subject's record
21. The legal custodian, guardian or conservator of the subject (a certified copy of a court order naming you is required)
22. The subject, when 16 years or older
23. Representatives of Minnesota programs that administer child support, medical assistance, MinnesotaCare, and services under Minnesota Statutes, sections 124D.23 and 626.556. (Employee ID is required)
24. Pursuant to a valid, certified copy of a U.S. court order (not a subpoena) releasing the certificate

Signature and Notary (application must be signed in front of a notary if applying by mail or fax)

I certify that the information provided on this application is accurate and complete to the best of my knowledge.

Requester's signature	Notary Stamp/Seal
Signed or attested before me on: _____ day of _____, 20_____	
Notary public signature	My commission expires

Birth Certificate Application

Complete this form to order a certified copy of a Minnesota birth certificate.

How many certificates do you want?	Request	Fee	Total
One birth certificate sent by First Class Mail®.	1	\$26	\$26
How many <i>additional</i> certificate(s) do you want to purchase for this birth record now?		\$19 each	
NOTICE: Fees are payable at the time of application and are non-refundable. <i>Minnesota Statutes, section 144.226.</i>		Total amount due: Amount must be at least \$26.	
If I am not eligible to receive the certificate I requested, Wadena County Recorder's Office will contact me. I give Wadena County Recorder's Office permission to apply my payment to a follow up application.			
How do you want to pay?			
<input type="checkbox"/> Credit card MasterCard/VISA/Discover	Cardholder name		Expiration date
	Card number		3-digit security code
<input type="checkbox"/> Check Check # _____ <input type="checkbox"/> Money order Money order # _____		Make your check or money order payable to WADENA 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, section 604.113, subdivision 2.</i>	
Send application and payment to:			
County Vital Records Office Personal checks are accepted for Minnesota applications ONLY. If out of state, PLEASE send money orders. THANK YOU.			
If you have questions , please contact us at corecorder@co.wadena.mn.us or call 218-631-7622.			