



PUBLIC HEALTH

VITAL RECORDS

Birth Certificate Order Form

This form is for ordering birth certificates for babies born in Lane County less than 5 months & 28 days ago only.

To order birth certificates for babies older than 5 months & 28 days, please contact Oregon State Vital Records in Portland, OR.

151 W. 7th Ave, Room 520, Eugene, OR 97401 ✦ Hours: 9 AM – 4:30 PM ✦ Phone: 541-682-4045 ✦ Fax: 541-682-9825

Instructions:

- Walk-In: Request in-person at Lane County Vital Records for same-day service. (Credit cards accepted!)
- Mail Orders: Include copy of valid photo ID of requestor, check or money order, \$25 per certificate, payable to Lane County Vital Records, and self-addressed envelope with postage. Please do not mail cash.

Quantity of certificates _____ Date of Birth (MM / DD / YYYY) _____ Sex: Male Female

Name of infant: _____ (First) _____ (Middle) _____ (Last)

Location of birth (Hospital / facility) _____

Mother's maiden name _____ (First) _____ (Middle) _____ (Maiden last name)

Father's full name _____ (First) _____ (Middle) _____ (Last)

Name of person ordering _____ (First) _____ (Middle) _____ (Last)

Relationship to infant:

Mother Father Sibling (18 yrs. or older) Maternal Grandparent Paternal Grandparent Legal Guardian

Mailing address (required): _____

City _____ State _____ Zip _____

Phone number _____ Signature _____ Date _____

In Accordance with law – ORS 432.120, access to birth records is restricted for 100 years to registrant, family members, legal representatives, government agencies and persons licensed or registered under ORS 703.430. Legal guardians must enclose a copy of the legal document. If you are not eligible, enclose a written permission note with a notarized signature of an eligible person. Providing false information is a felony under ORS 432.900.

OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE

OR DL: _____ Exp. Date ____ / ____ / ____ Pmt Type: Cash / CC / Check-MO# _____

Passport or Other ID: _____ Exp. Date ____ / ____ / ____ Today's Date: _____

Exchange Returned Cert #s: _____ - _____ Certificate Number(s) _____ - _____

Case # _____ Order # _____ Amount Received: \$ _____