

# AMENDMENT PACKET FOR ALABAMA BIRTH AND DEATH CERTIFICATES

This packet provides information to begin the process of changing or correcting an Alabama birth or death certificate. In most cases, additional documentation or a court order will be required.

## Birth Certificates

### ■ Amendments (Changing/Correcting a Birth Certificate) – Application 1

Information on a birth certificate entered in error when the birth certificate was originally prepared may be corrected through an amendment process as specified by law. **Legal documentation or court action may be required to process the amendment.**

The fee to amend a birth certificate is \$20.00 which includes one certified copy of the amended birth certificate. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request.

### ■ Legitimations (Adding the Father to a Child's Birth Certificate) – Application 2

Legitimations establish the legal father of a child, allow the father's name to be added to a child's birth certificate, and in some cases allow the child's name to be changed. The following four (4) legitimation methods are legal procedures and can be used only if legal requirements are met. **Documentation in addition to the attached application will be required to change a birth record through any legitimation process.**

1. Probate Court Legitimations are processed by the Probate Courts.
2. Legitimations through Marriage are processed by the Center for Health Statistics.
3. Acknowledgments of Paternity are processed by the County Department of Human Resources or the Center for Health Statistics.
4. Paternity Determinations are processed by the Circuit Courts (Juvenile Division) under the Uniform Parentage Act. **Note:** In some cases, a court determination can remove a father from a child's birth certificate.

The fee to prepare the new birth certificate following legitimation is \$25.00 which includes one certified copy of the new birth certificate. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request.

### ■ Adoptions – Application 3

When an adoption is finalized in court, information on the birth certificate, such as the child's name and the parents' names, can be changed. **Court documentation in addition to the attached application will be required to change a birth record after an adoption occurs.**

The fee to prepare the new birth certificate following adoption is \$25.00 which includes one certified copy of the new birth certificate. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request.

To request a birth amendment or a new birth certificate following legitimation or adoption, complete the appropriate application provided in this packet and indicate the specific changes to be made to the birth certificate. Mail the completed application with valid identification and the appropriate fee to:

**Center for Health Statistics  
Special Services Division  
P.O. Box 5625  
Montgomery, Alabama 36103-5625**

If you have any questions regarding changes to a birth certificate, call 334.206.2637.

## Death Certificates

### ■ **Changes/Corrections to the Personal/Demographic Information – Application 1**

Personal/demographic information may be corrected through the amendment process by the funeral home, the informant, an immediate family member listed on the record or others with an appropriate legal interest. The “Application to Change an Alabama Birth or Death Certificate” should be completed, indicating the changes to be made to the death certificate. Legal documentation or court action may be required to process the amendment. **The original information on the death certificate will not be changed. The amendment will be an affidavit issued with the original certificate indicating the items which were corrected.**

The fee to amend a death certificate is \$20.00 which includes one certified copy of the certificate. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request. Mail the completed application referenced above with valid identification and the appropriate fee to the address provided in item #3 below.

### ■ **Changes/Corrections to the Medical Certification Information; the Date of Death/Pronouncement; and/or Time of Death/Pronouncement**

Only the certifier (physician, certified registered nurse practitioner, certified nurse midwife, coroner or medical examiner) who signed the death certificate may make changes/corrections to this information on the death certificate. **The application referenced above cannot be used to request changes/corrections to these items.** However, instructions for requesting these changes/corrections are listed below.

#### 1. **Changing a Cause of Death from “Pending”**

When the certifier receives the autopsy report, he/she should complete a Supplemental Medical Certification.

#### 2. **Changing Information on a Cause of Death or Other Changes to the Medical Certification Section**

The certifier may make changes or corrections to the medical certification section of the death certificate by completing a Supplemental Medical Certification.

#### 3. **Completing a Supplemental Medical Certification**

In most cases when the death certificate was filed through the Electronic Death Registration System (EDRS), the certifier may be able to complete an electronic Supplemental Medical Certification through EDRS. If the certifier needs to complete a paper Supplemental Medical Certification, he/she should contact the Center for Health Statistics at 334.206.2641 to request a Supplemental Medical Certification Request Form (HS-90) or fax a request to 334.206.2659. When the Supplemental Medical Certification Request Form has been completed, it should be mailed to:

**Center for Health Statistics  
Special Services Division  
Death Amendment Clerk  
P.O. Box 5625  
Montgomery, Alabama 36103-5625**

#### 4. **Changing a Date of Death/Pronouncement and/or Time of Death/Pronouncement**

The certifier must submit a signed and dated business letter providing sufficient information to locate the death certificate and the specific changes which should be made to the death certificate.

Due to the legal issues involved with the amendment of some items, questions regarding amendments to a death certificate should be referred to 334.206.2641.

# APPLICATION TO CHANGE AN ALABAMA BIRTH OR DEATH CERTIFICATE

The fee to amend (correct) an Alabama birth or death certificate is \$20.00 which includes one certified copy of the amended certificate. The fee for Paternity Determinations (Legitimations) and/or Adoptions is \$25.00 which includes one certified copy of the new certificate. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request. Make check or money order payable to "State Board of Health." Do not send cash. **Fees are non-refundable.** Indicate the type of certificate you are requesting to be corrected. PRINT the information identifying the certificate in the appropriate section. Only one request may be made per form. You must complete and sign the applicant section or your request cannot be processed. **If 19 years of age or older, the record holder must sign the application when requesting changes to his or her birth certificate.**

**MAIL THIS COMPLETED FORM WITH VALID IDENTIFICATION AND APPROPRIATE FEE TO:**

**Center for Health Statistics  
P.O. Box 5625, Montgomery, Alabama 36103-5625  
Visit our website at: [www.alabamapublichealth.gov/vitalrecords](http://www.alabamapublichealth.gov/vitalrecords).**

**Birth Certificate Amendments (corrections) may be requested using this form. For further information, call a Birth Amendment Clerk at 334.206.2637.**

**Refer to the attached Birth Certificate Amendment instructions. In most cases, additional documentation or a court order will be required. SEE ID REQUIREMENTS ON REVERSE SIDE.**

**\_\_\_ BIRTH** FULL NAME AS  
ON BIRTH CERTIFICATE \_\_\_\_\_  
First Middle Last

Number DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_

of Copies COUNTY OF BIRTH \_\_\_\_\_ HOSPITAL \_\_\_\_\_

Requested FULL NAME OF MOTHER/PARENT  
BEFORE FIRST MARRIAGE \_\_\_\_\_

\_\_\_\_\_ FULL NAME OF FATHER/PARENT  
BEFORE FIRST MARRIAGE \_\_\_\_\_

**What changes are you requesting?** \_\_\_\_\_

**Death Certificate Amendments (corrections) to the personal/demographic information ONLY may be requested using this form. Questions regarding changes or corrections to the medical certification section should be referred to the Death Amendment Clerk at 334.206.2641.**

**Refer to the attached Death Certificate Amendment instructions. In most cases, additional documentation or a court order will be required. SEE ID REQUIREMENTS ON REVERSE SIDE.**

**\_\_\_ DEATH** LEGAL NAME OF DECEASED \_\_\_\_\_  
First Middle Last

Number DATE OF DEATH \_\_\_\_\_ SSN \_\_\_\_\_ RACE \_\_\_\_\_

of Copies SEX \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ COUNTY OF DEATH \_\_\_\_\_

Requested FULL NAME OF MOTHER/PARENT  
BEFORE FIRST MARRIAGE \_\_\_\_\_

\_\_\_\_\_ FULL NAME OF FATHER/PARENT  
BEFORE FIRST MARRIAGE \_\_\_\_\_

Starting with 1991 deaths, certificates may be issued without a cause of death. Indicate the number of copies of each type of certificate you want:  
\_\_\_\_\_ WITH CAUSE OF DEATH \_\_\_\_\_ WITHOUT CAUSE OF DEATH

**What changes are you requesting?** \_\_\_\_\_

**APPLICANT SECTION (THIS SECTION MUST BE COMPLETED) Birth certificates less than 125 years old and death certificates less than 25 years old are restricted records. Valid identification must be submitted with a request to change a birth or death certificate. Anyone falsely applying for a record is subject to a penalty upon conviction of up to three months in the county jail or a fine of up to \$500. (Code of Alabama 1975, § 13A-10-109). By signing, you are certifying you have a legal right to the record requested.**

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Your Name \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_

Your Relationship to Person Whose Record is Being Requested \_\_\_\_\_

Mail to Name (if Different from You) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_

I allow the following individual to receive the certificate(s) \_\_\_\_\_

## IDENTIFICATION REQUIREMENTS FOR RESTRICTED ALABAMA VITAL RECORDS

Identification is required of any applicant requesting a restricted Alabama vital record (birth certificate less than 125 years from the date of birth or death certificate less than 25 years from the date of death). The applicant must submit a completed request and **one** form of identification from the **Primary ID** list below. In the event the applicant is unable to provide identification from the Primary ID list, he/she may provide **two** different forms of identification from the **Secondary ID** list.

If the applicant designates another individual to pick up a restricted certificate on his/her behalf, both the applicant **and** the designee must provide acceptable identification.

The completed request, as well as a copy of all identification submitted, will be maintained by the vital records office which processes the request.

<b>Primary IDs Including PHOTO (need at least one, current, expired no more than 60 days)</b>	<b>Secondary IDs (need at least two)</b>
<ul style="list-style-type: none"> <li>- Alabama Driver's License</li> <li>- Out-of-State Driver's License</li> <li>- State-Issued Non-Driver ID</li> <li>- U.S. or Foreign Passport</li> <li>- U.S. Certificate of Naturalization</li> <li>- Certificate of Citizenship</li> <li>- U.S. Military ID</li> <li>- Work ID (If applicant is employee of agency/company making request)</li> <li>- Alien Resident Card (Temporary or Permanent)</li> <li>- U.S. Employment Authorization Card</li> <li>- Citizenship ID Card</li> <li>- Tribal ID</li> <li>- Pilot's License</li> <li>- Boating License</li> <li>- Concealed Weapons License</li> <li>- Ex-Felon ID</li> <li>- Inmate ID issued by the U.S. Dept of Justice w/ following documentation:               <ul style="list-style-type: none"> <li>o Supporting documents from institution if inmate is still in custody, letter of release from institution if inmate has been released</li> </ul> </li> <li>- School ID (Must include current school term)</li> <li>- Alabama Voter Identification Card</li> </ul>	<ul style="list-style-type: none"> <li>- Expired, Government-Issued ID</li> <li>- Utility Bill (No more than 6 months old)</li> <li>- Work ID (If applicant is making personal request)</li> <li>- Vehicle Registration or Vehicle Title</li> <li>- Property Tax Bill</li> <li>- Military Discharge (DD Form 214)</li> <li>- Voter Registration Card</li> <li>- Health Insurance Card</li> <li>- Social Security Correspondence (not Card)</li> <li>- U.S. Selective Service Card</li> <li>- Recent DMV Receipt for Fines Paid</li> <li>- Fishing or Hunting License</li> <li>- Copy of Police Report or other official documents which support theft, in cases where individual's ID has been stolen</li> <li>- Autism Spectrum Card</li> <li>- Immunization (Shot) Record</li> </ul> <p style="margin-top: 20px;"><i>*In special cases where applicant is unable to provide any of these documents, please contact CHS at 334.206.5418.</i></p>

## APPLICATION TO ADD FATHER TO CHILD'S ALABAMA BIRTH CERTIFICATE

Please complete this form to add the father's information to the birth certificate of the child listed below. Before we begin to process your request, additional information, valid identification (see reverse side) and/or documents are needed. Please answer the following questions and provide the documents as indicated when you return this form. After reviewing the information you provide, we will advise you if other documents will be required or if a court action is needed. If you are not a parent of the child or if you do not have legal custody of the child, we may not be able to process your request.

The fee to prepare the new birth certificate is \$25.00 which includes one certified copy of the new birth certificate. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request. Make check or money order payable to "State Board of Health." Do not send cash. Fees are not refundable if the action cannot be completed due to non-receipt of the required documents. However, we will return the fee if we determine you are not legally authorized to make the request.

**INFORMATION ON APPLICANT (THIS SECTION MUST BE COMPLETED)** Valid identification must be submitted with a request to change a birth certificate. Anyone falsely applying for a record is subject to a penalty upon conviction of up to three months in the county jail or a fine of up to \$500. (Code of Alabama 1975, § 13A-10-109). **By signing, you are certifying you have a legal right to the record requested.**

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Your Name \_\_\_\_\_ Number of Copies \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_

Your Relationship to Child \_\_\_\_\_

Mail to Name (if Different from You) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone (\_\_\_\_) \_\_\_\_\_

I allow the following individual to receive the certificate(s) \_\_\_\_\_

### INFORMATION TO LOCATE CHILD'S BIRTH CERTIFICATE

CHILD'S FULL NAME AS SHOWN ON BIRTH CERTIFICATE \_\_\_\_\_  
First Middle Last

CHILD'S DATE OF BIRTH \_\_\_\_\_ CHILD'S COUNTY OF BIRTH \_\_\_\_\_

MOTHER'S FULL NAME BEFORE FIRST MARRIAGE \_\_\_\_\_

MOTHER'S LEGAL NAME AT TIME OF BIRTH \_\_\_\_\_

### INFORMATION REGARDING CHILD'S PARENTAGE

1. Do you want the father's name added to the child's birth certificate?	_____ Yes _____ No
2. Do you want to change the child's name on the birth certificate when you add the father's name?	_____ Yes _____ No
3. Was the mother married to anyone at the time of the child's birth, or within 300 days before the child's birth?	_____ Yes _____ No
4. Have the father and mother married since the child was born? <b>If Yes, send a certified copy of the marriage certificate.</b>	_____ Yes _____ No
5. Has an individual ever claimed to be the father of this child in court? <b>If Yes, send a certified copy of the court order.</b>	_____ Yes _____ No
6. Has the child support court or any other type of court ever declared an individual to be the father of this child? <b>If Yes, send a certified copy of the court order.</b>	_____ Yes _____ No
7. Has a court established legal custody for this child? <b>If Yes, send a certified copy of the custody order.</b>	_____ Yes _____ No
8. What is the father's name, date of birth and state of birth?	

Father's Name \_\_\_\_\_ Father's Date of Birth \_\_\_\_\_ Father's State of Birth \_\_\_\_\_

**MAIL THIS COMPLETED FORM WITH VALID IDENTIFICATION AND APPROPRIATE FEE TO:**

Center for Health Statistics

Attn: Legitimations

P. O. Box 5625

Montgomery, Alabama 36103-5625

If you have any questions, call 334.206.2637. Visit our website at: [www.alabamapublichealth.gov/vitalrecords](http://www.alabamapublichealth.gov/vitalrecords).

## IDENTIFICATION REQUIREMENTS FOR RESTRICTED ALABAMA VITAL RECORDS

Identification is required of any applicant requesting a restricted Alabama vital record (birth certificate less than 125 years from the date of birth or death certificate less than 25 years from the date of death). The applicant must submit a completed request and **one** form of identification from the **Primary ID** list below. In the event the applicant is unable to provide identification from the Primary ID list, he/she may provide **two** different forms of identification from the **Secondary ID** list.

If the applicant designates another individual to pick up a restricted certificate on his/her behalf, both the applicant **and** the designee must provide acceptable identification.

The completed request, as well as a copy of all identification submitted, will be maintained by the vital records office which processes the request.

<b>Primary IDs Including PHOTO (need at least one, current, expired no more than 60 days)</b>	<b>Secondary IDs (need at least two)</b>
<ul style="list-style-type: none"> <li>- Alabama Driver's License</li> <li>- Out-of-State Driver's License</li> <li>- State-Issued Non-Driver ID</li> <li>- U.S. or Foreign Passport</li> <li>- U.S. Certificate of Naturalization</li> <li>- Certificate of Citizenship</li> <li>- U.S. Military ID</li> <li>- Work ID (If applicant is employee of agency/company making request)</li> <li>- Alien Resident Card (Temporary or Permanent)</li> <li>- U.S. Employment Authorization Card</li> <li>- Citizenship ID Card</li> <li>- Tribal ID</li> <li>- Pilot's License</li> <li>- Boating License</li> <li>- Concealed Weapons License</li> <li>- Ex-Felon ID</li> <li>- Inmate ID issued by the U.S. Dept of Justice w/ following documentation:               <ul style="list-style-type: none"> <li>o Supporting documents from institution if inmate is still in custody, letter of release from institution if inmate has been released</li> </ul> </li> <li>- School ID (Must include current school term)</li> <li>- Alabama Voter Identification Card</li> </ul>	<ul style="list-style-type: none"> <li>- Expired, Government-Issued ID</li> <li>- Utility Bill (No more than 6 months old)</li> <li>- Work ID (If applicant is making personal request)</li> <li>- Vehicle Registration or Vehicle Title</li> <li>- Property Tax Bill</li> <li>- Military Discharge (DD Form 214)</li> <li>- Voter Registration Card</li> <li>- Health Insurance Card</li> <li>- Social Security Correspondence (not Card)</li> <li>- U.S. Selective Service Card</li> <li>- Recent DMV Receipt for Fines Paid</li> <li>- Fishing or Hunting License</li> <li>- Copy of Police Report or other official documents which support theft, in cases where individual's ID has been stolen</li> <li>- Autism Spectrum Card</li> <li>- Immunization (Shot) Record</li> </ul> <p><i>*In special cases where applicant is unable to provide any of these documents, please contact CHS at 334.206.5418.</i></p>

## APPLICATION TO REQUEST A NEW BIRTH CERTIFICATE AFTER ADOPTION

When a child is adopted through an Alabama court, the court forwards the order of adoption and information showing the child's new name and the names of the new parents to the Center for Health Statistics in Alabama. Upon receipt of the information, the Center for Health Statistics will do one of the following depending upon where the child was born:

**IF THE ADOPTED CHILD WAS BORN IN ALABAMA:**

- The Center for Health Statistics will prepare a new birth certificate for the child showing the new names.
- The fee to prepare the new certificate of birth after adoption is \$25.00 which includes one certified copy of the new record. Additional copies of the same record ordered at the same time are \$6.00 each. There is an additional fee of \$15.00 to expedite a request.
- To obtain a copy of the child's new birth certificate, complete the application form below. **Valid identification must be submitted with a request for a new Alabama birth certificate after adoption.** See the identification requirements on the reverse side.

**IF THE ADOPTED CHILD WAS BORN IN ANOTHER STATE:**

- The new birth certificate for the child must be prepared in the state where the child was born.
- The fee for the Center for Health Statistics to forward the order of adoption to the child's state of birth is \$10.00.
- Upon receipt of the fee, the Center for Health Statistics will forward the court order of adoption and the information showing the new name to the appropriate vital records office in the state where the child was born.
- You will need to contact the state of birth for a copy of the new certificate.

Make check or money order payable to "State Board of Health." Do not send cash. **Fees are non-refundable. Complete the application below and send with the required documents and appropriate fee to:**

**Center for Health Statistics  
Attn: Adoptions  
P.O. Box 5625  
Montgomery, Alabama 36103-5625**

Please allow 2-4 weeks after the court action has been completed before mailing your request, valid identification (if requesting an Alabama birth certificate) and fee. If this is an adult adoption or you have additional questions, call 334.206.2637. Visit our website at [www.alabamapublichealth.gov/vitalrecords](http://www.alabamapublichealth.gov/vitalrecords).

**IF THE CHILD WAS BORN IN A FOREIGN COUNTRY, DO NOT COMPLETE THIS FORM.** Call 334.206.2637 for additional information and appropriate forms.

FULL NAME OF CHILD BEFORE ADOPTION (IF KNOWN) \_\_\_\_\_

First Middle Last

FULL NAME OF CHILD AFTER ADOPTION \_\_\_\_\_

First Middle Last

STATE OF BIRTH \_\_\_\_\_ COUNTY OF BIRTH \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_

FULL NAME OF ADOPTIVE MOTHER/PARENT BEFORE FIRST MARRIAGE \_\_\_\_\_

FULL NAME OF ADOPTIVE FATHER/PARENT BEFORE FIRST MARRIAGE \_\_\_\_\_

**APPLICANT SECTION  
(THIS SECTION MUST BE COMPLETED)**

If Alabama Birth, Amount  
Number of Copies \_\_\_\_\_ Enclosed \$ \_\_\_\_\_

**Valid identification must be submitted with a request to change a birth certificate. Anyone falsely applying for a record is subject to a penalty upon conviction of up to three months in the county jail or a fine of up to \$500. (Code of Alabama 1975, § 13A-10-109). By signing, you are certifying you have a legal right to the record requested.**

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Your Name \_\_\_\_\_

Your Relationship to Child \_\_\_\_\_

Mail to Name (if Different from You) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone (\_\_\_\_\_) \_\_\_\_\_

I allow the following individual to receive the certificate(s) \_\_\_\_\_

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Primary IDs Including PHOTO (need at least one, current, expired no more than 60 days)	Secondary IDs (need at least two)
<ul style="list-style-type: none"> <li>- Alabama Driver's License</li> <li>- Out-of-State Driver's License</li> <li>- State-Issued Non-Driver ID</li> <li>- U.S. or Foreign Passport</li> <li>- U.S. Certificate of Naturalization</li> <li>- Certificate of Citizenship</li> <li>- U.S. Military ID</li> <li>- Work ID (If applicant is employee of agency/company making request)</li> <li>- Alien Resident Card (Temporary or Permanent)</li> <li>- U.S. Employment Authorization Card</li> <li>- Citizenship ID Card</li> <li>- Tribal ID</li> <li>- Pilot's License</li> <li>- Boating License</li> <li>- Concealed Weapons License</li> <li>- Ex-Felon ID</li> <li>- Inmate ID issued by the U.S. Dept of Justice w/ following documentation:               <ul style="list-style-type: none"> <li>o Supporting documents from institution if inmate is still in custody, letter of release from institution if inmate has been released</li> </ul> </li> <li>- School ID (Must include current school term)</li> <li>- Alabama Voter Identification Card</li> </ul>	<ul style="list-style-type: none"> <li>- Expired, Government-Issued ID</li> <li>- Utility Bill (No more than 6 months old)</li> <li>- Work ID (If applicant is making personal request)</li> <li>- Vehicle Registration or Vehicle Title</li> <li>- Property Tax Bill</li> <li>- Military Discharge (DD Form 214)</li> <li>- Voter Registration Card</li> <li>- Health Insurance Card</li> <li>- Social Security Correspondence (not Card)</li> <li>- U.S. Selective Service Card</li> <li>- Recent DMV Receipt for Fines Paid</li> <li>- Fishing or Hunting License</li> <li>- Copy of Police Report or other official documents which support theft, in cases where individual's ID has been stolen</li> <li>- Autism Spectrum Card</li> <li>- Immunization (Shot) Record</li> </ul> <p><i>*In special cases where applicant is unable to provide any of these documents, please contact CHS at 334.206.5418.</i></p>