

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 "Center for Health Statistics." 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.**

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.

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