

# Alaska Birth Certificate Request Form Instructions

## Who may obtain a birth certificate?

- Parent(s) listed on the certificate.
- Child listed on the certificate (if 14 years old or older) along with a school ID.
- Legal Guardian with certified guardianship papers.
- Third-Party requests must have a notarized letter of consent for the release of information from the certificate holder or legal guardian.
- Attorneys & Government Agencies must have a letter on their letterhead stating who they represent and why the record is needed. Must provide supporting documentation.

## Accepted forms of ID (must be unexpired):

- Driver's license
- State-issued ID card
- Passport
- Military ID
- Tribal/BIA card
- If you have none of the above forms of ID, please contact (907) 465-3391 for assistance.

## How to submit a request:

- Complete this form with payment and a copy of your ID and submit to Vital Records:
- **\*Faxed orders:** please call 10 minutes after sending your fax to confirm receipt.

### Alaska Vital Records Office - JUNEAU

Physical Address > 5441 Commercial Blvd (zip code: 99801)

Mailing Address > PO Box 110675 (zip code: 99811-0675)

Juneau, AK

Office Hours: 8:00 am - 5:00 pm (Walk-In Service)

Phone: (907) 465-3391

FAX: (907) 465-3618\*

[hss.vr.apps@alaska.gov](mailto:hss.vr.apps@alaska.gov) (Email Orders)

### Alaska Vital Records Office - ANCHORAGE

3601 C Street, Suite 128 (Frontier Bldg)

Anchorage, AK 99503

Office Hours: 8:00 am to 4:30 pm (Walk-In Service)

Phone: (907) 269-0991

*\* Expedited requests must be emailed or faxed*

**\*\* Expedited Paternity, Adoptions or Corrections to a Birth Certificate must be mailed or hand-delivered as Original Documents and/or Certified copies of forms are required. For additional information on how to amend the Birth Certificate, please contact our Special Services Unit at (907) 465-1200.**

Services	Cost	Add'l Copies*
Certified Copy (Birth, marriage, divorce, death) <sup>†</sup>	\$30	\$25
Marriage License	\$60	N/A
Marriage License Re-Issue Fee	\$15	N/A
Adoptions, Paternity, or Amendment/Correction (includes new certificate) <sup>#</sup>	\$60	N/A
Medical Marijuana Card	\$25	\$20 (renewal)
Heirloom Birth Certificate	\$55	\$50
Heirloom Marriage Certificate	\$65	\$60
Apostille (in addition to Certified Copy Fee)	\$12	\$2
Expedite Fee (process request within 48 business hours)	\$11	N/A

\*Additional copies are defined as the same record ordered at the same time. Fees are set in accordance with AS 18.50.330. The fees and postage rates reflected on this form are accurate as of June 2018. Please refer to [www.vitalrecords.alaska.gov](http://www.vitalrecords.alaska.gov) for the most current fees and postage rates.

<sup>†</sup> NOTE: If the requested record cannot be found, you will be issued a "Record not Found" on certified paper for the same price as the certificate itself.

<sup>#</sup> For paternity, adoptions and corrections information, contact our Special Services unit (907) 465-1200

## Processing times from receipt of request:

Please visit our website and select "Frequently Asked Questions": [www.vitalrecords.alaska.gov](http://www.vitalrecords.alaska.gov)

**STATE OF ALASKA  
BIRTH CERTIFICATE REQUEST FORM**

- Please read the instructions on the first page. **Incomplete or inaccurate requests or requests that do not include a copy of a government-issued ID with a signature below the ID will be returned unprocessed.**
- **THIS FORM CANNOT BE USED TO CHANGE/AMEND A BIRTH CERTIFICATE.** Please contact our Special Services Unit.

**FULL** First/Middle/Last Name on the Birth Certificate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date of Birth: \_\_\_\_\_

City or Village of Birth: \_\_\_\_\_

Mother's **FULL** name before she was first married: \_\_\_\_\_

Father's **FULL** name: \_\_\_\_\_

Purpose of the request: \_\_\_\_\_

(Personal Records, Legal Purposes, Inheritance/Estate Settlement, Govt. Assistance/Benefits, Insurance/Pension, Retirement, etc. )

Your Relationship to the Child Named on the Record:    Self    Mother    Father    Legal Rep    Other: \_\_\_\_\_

Signature of the Person Requesting the Record

(ELECTRONIC/TYPED SIGNATURE NOT ACCEPTED): 

Contact Phone Number: \_\_\_\_\_

**JUNEAU – Vital Records Office**

(mail) PO Box 110675 (zip code: 99811-0675)  
(walk-in) 5441 Commercial Blvd (zip code: 99801)  
Juneau, AK

Phone: (907) 465-3391 / Fax: (907) 465-3618

**Walk-Ins / Mail / Email / On-line**

(See back of Form for details)

**ANCHORAGE – Vital Records Office**

3601 C Street, Suite 128 (Frontier Bldg)

Anchorage, AK 99503

Phone: (907) 269-0991

**Walk-Ins / Mail**

**Submit this form with PAYMENT:**

In Person: Cash / Check / Money Order / Credit Card

By Mail: Check / Money Order / Credit Card

By Fax: Credit Card

\$30 NSF Fee – for returned checks.

**Checks/MO payable to:** Alaska Vital Records Office

**# Copies**

**Amount**

**Birth Certificates** (\$30 one copy; \$25 each additional copy of the same record ordered at the same time.)

**Paternity, Correction, Adoption or Legal Name Change Processing Fee** (\$30)

**Apostille fee** (\$12 for first copy, \$2 each additional copy)

**Apostille Country:** \_\_\_\_\_

**Heirloom Certificates** (\$55 first copy; \$50 each additional copy) **Heirloom Certificate** (select one)

☐ Rie Muñoz, "The Embrace"

☐ Jon Van Zyle, "Polar Bears"

☐ **\*Expedited/Rush Service** (Fax/Email Orders) - (\$11.00)

*\*If Birth is already registered; Registration process or records with administrative holds **cannot** be rushed*

*\*Does **not** include shipping fees*

**Shipping Method:**

(Call our office for shipping rates outside the U.S)

**Tracking available for Priority, Express and FedEx.**

Orders shipped with tracking are insured for replacement if lost (**recommended**)

☐ **Regular Mail** (**No Tracking Available**)

(**No tracking** for your sensitive documents. If documents are lost in the mail, you will need to resubmit your order with ID & Payment)

No fee

☐ **Priority Mail** (Add \$8.00)

☐ **Express Mail** (Add \$26.00)

☐ **FedEx** (No P.O. Box / Add \$24.25)

**TOTAL**

**Please enter your mailing address below:**

**HAVE YOU INCLUDED?**

☐ **Copy of ID**

☐ **Payment**

☐ **Other documentation** (please list if applicable)

Name: \_\_\_\_\_

Street / PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Credit Card Information (When paying by credit card)**

Name on credit card: \_\_\_\_\_

Billing address: \_\_\_\_\_

Number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

**Visa**

**Mastercard**

**Discover**

**American Express**

**Cardholder signature REQUIRED**  
(ELECTRONIC/TYPED SIGNATURE NOT ACCEPTED): 