



**Florida Department of Health**  
**The Office of Sam C. Steele**  
 Monroe County Tax Collector  
 P.O. Box 1129  
 Key West, Florida 33041-1129



**APPLICATION FOR FLORIDA BIRTH CERTIFICATE (Tax Collector Use Only)**

**Applicant Information (Eligibility Requirement on Reverse Side)**

*Any person who willfully and knowingly provides any false information on a certificate, record or report required by Chapter 382, Florida Statutes, or on an application or affidavit, or who obtains confidential information from any Vital Record under false or fraudulent purposes, commits a felony of the third degree, punishable as provided in Chapter 775, Florida Statutes.*

Applicant's Name: \_\_\_\_\_  
 (Person Requesting the record)

Mailing Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Phone (with area code): \_\_\_\_\_ email: \_\_\_\_\_

Relationship to Person on Birth Record (Self or Parent Listed): \_\_\_\_\_

Signature: \_\_\_\_\_

**APPLICANT'S VALID PHOTO IDENTIFICATION IS REQUIRED: Driver's License, State Identification Card, Passport, Military Identification Card.**

**Information for Birth Search**

Full Name on Birth Record: \_\_\_\_\_

Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ City/County: \_\_\_\_\_

Mother's / Parent's Full Name Prior to First Marriage: \_\_\_\_\_

Father's / Parent's Full Name Prior to First Marriage: \_\_\_\_\_

**Ordering Information**

	Fee		Quantity	
<b>Birth Certificate: \$20.00</b> first copy	<input type="text"/>	X	<input type="text"/>	<input type="text"/>
<b>Additional Birth Certificate(s): \$20.00</b> each	<input type="text"/>	X	<input type="text"/>	<input type="text"/>
<b>Administrative Fee: \$6.25</b> per individual birth record (not copies)	<input type="text"/>	X	<input type="text"/>	<input type="text"/>
<b>Debit Card Transaction Fee</b> (per transaction)	<input type="text"/>	X	<input type="text"/>	<input type="text"/>
<b>Credit Card Transaction Fee</b> (2.50% of total or \$2.50, whichever is greater)	<input type="text"/>	X	<input type="text"/>	<input type="text"/>
<b>Total Amount Enclosed</b>				<input type="text"/>

**For Office Use Only:**  
 Date: \_\_\_\_\_ Audit Control #(s) Issued: \_\_\_\_\_

# INFORMATION AND INSTRUCTIONS FOR BIRTH CERTIFICATE APPLICATION

## (Tax Collector Use Only)

**COMPUTER CERTIFICATION OF BIRTH:** Computer certification of birth printed on security paper with the Florida embossed seal, which is accepted by all state and federal agencies. Computer certifications are available from 1850 to present but are limited from 1850-1916. A computer certification has two different formats based on the year of birth:

- **2004 to Present includes:** Registrant (name on the record), Date of Birth, Sex, Time, Weight, Place of Birth (City/County); and Parent(s) Name, DOB, Place of Birth.
- **1850 to 2003 includes:** Registrant (name on the record), Date of Birth, Sex, County of Birth and Parent(s) Name.

**AVAILABILITY:** Birth registration was not required by state law until 1917, but there are some records on file dating back to 1850.

**ELIGIBILITY (Section 382.025, Florida Statutes):** Birth certificates less than 125 years old can be issued only to:

1. Registrant (the child named on the record) if of legal age (18)
2. Parent(s) listed on the Birth Record

If applicant is not one of the above, client may be referred to the Florida Department of Health County Vital Statistics office for further assistance. In the case of a deceased registrant, upon receipt of the death certificate of the decedent, a birth certificate marked "Deceased" can be issued to any of the eligible persons listed above.

**REQUIREMENT FOR ORDERING:** Eligible applicant must provide a completed application, valid photo identification, and any documentation required for proof of eligibility. Acceptable forms of identification are the following: Driver's License, State Identification Card, Passport and/or Military Identification Card.

**FEES:** Fees are non-refundable.

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