



APPLICATION FOR FLORIDA BIRTH RECORD

Florida Department of Health in Broward County

Vital Statistics Department

780 SW 24 Street, Ft. Lauderdale, FL 33315-2643

(954)-467-4413

Read the FRONT AND BACK of this application: Requirement for ordering: If applicant is self, parent, guardian, or legal representative, then the applicant must complete this application and provide valid photo identification, if a mail request, a copy of the valid photo identification must be provided. If applicant is not one of the above, the Affidavit to Release a Birth Certificate must be completed by an authorized person and submitted in addition to this application form. Acceptable forms of identification are the following: Driver's License, State Identification Card, Passport, and/or Military Identification Card.

SECTION A: REGISTRANT INFORMATION

REGISTRANT'S FULL NAME AS SHOWN ON BIRTH RECORD	FIRST MARIA CATARINA	MIDDLE FERREIRA DE ARAUJO	LAST COSTA	SUFFIX	
IF NAME WAS CHANGED SINCE BIRTH, INDICATE NEW NAME	FIRST	MIDDLE	LAST	SUFFIX	
DATE OF BIRTH	MONTH 06	DAY 09	YEAR (4 DIGIT) 2026	STATE FILE NUMBER (if known)	SEX F
PLACE OF BIRTH	HOSPITAL HCA Florida Northwest Hospital	CITY OR TOWN MARGATE	COUNTY BROWARD		
MOTHER'S/PARENT'S NAME	FIRST MANUELLA	MIDDLE	LAST NAME PRIOR TO MARRIAGE(if applicable) FERREIRA DO VALE	SUFFIX	
FATHER'S/PARENT'S NAME	FIRST RODOLPHO LUIZ	MIDDLE	LAST NAME PRIOR TO MARRIAGE(if applicable) DE ARAUJO COSTA	SUFFIX	

IMPORTANT INFORMATION

Any person who willfully and knowingly provides any false information on a certificate, record or report required by Chapter 382, Florida Statutes, or on any 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.

SECTION B: APPLICANT (adult requesting certificate) INFORMATION

Applicant's Name TYPE OR PRINT	FIRST, MIDDLE, LAST (INCLUDING ANY SUFFIX)	SIGNATURE OF APPLICANT	
CONTACT PHONE NUMBER ()	MAILING ADDRESS (INCLUDE APT. NO., IF APPLICABLE)	RELATIONSHIP TO REGISTRANT	
ALTERNATE PHONE NUMBER ()	CITY	STATE	ZIP CODE
IF ATTORNEY, PROVIDE BAR/PROFESSIONAL LICENSE NO.	LICENSE/ BAR NUMBER	NAME OF PERSON REPRESENTED	and THEIR RELATIONSHIP TO REGISTRANT

CERTIFICATES AND FEES – Certificates available for Florida births only

Services	Cost	Quantity	Total Cost
☒ Certified Copy	\$15.00	1	\$15.00
☐ Additional Certified Copy	\$15.00		
☒ Plastic Covers for Certificates	\$ 3.00	1	\$3.00
☐ Notary Fee (In Person Only)	\$10.00		
☐ Expedite Processing (takes 3 to 5 business days to process – returned by first class mail)	\$10.00		
☐ Overnight Processing (takes 3 to 5 business days to process– returned by overnight delivery)	\$21.00		

Note: Expedite or Overnight Processing is for mail orders, and is per order (choose only one)

TOTAL DUE: \$ 18.00

CREDIT CARD ORDERS ONLY – To be completed by credit card holder along with valid photo identification

Type: ☒ Visa ☐ MasterCard ☐ AmEx ☐ Discover	Card Number: 5312 6001 4800 8484	Expiration: 09/28		
Full Name on Card:	First RODOLPHO	Last COSTA	CVV: 503	
Cardholder's Address:	Street 4200 CRYSTAL LAKE DR, APT 308	City POMPAÑO BEACH	State FL	Zip 33064
Cardholder's Signature:				

In Person Only...
2421-A SW 6th Avenue
Fort Lauderdale, FL 33315

In Person Only...
4105 Pembroke Road
Hollywood, FL 33021

In Person Only...
205 NW 6th Avenue
Pompano Beach, FL 33060

INFORMATION AND INSTRUCTIONS FOR BIRTH RECORD APPLICATION

COMPUTER CERTIFICATION: computer certifications are accepted by all state and federal agencies and used for any type of travel.

A computer certification has two different formats:

1. A certification of a registered birth (2004 to present), supplies the following facts of birth: Child's Name, Date of Birth, Sex, Time, Weight, Place of Birth (City, County and Location) and Parents' Information.
2. A certification of a registered birth (1930 to 2003), supplies the following facts of birth: Child's Name, Date of Birth, Sex, County of Birth and Parents' Name.

AVAILABILITY: Birth registration was not required by state law until 1917, but there are some records on file dating back to 1865.

ELIGIBILITY: Birth certificates 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
3. Legal guardian (must provide guardianship papers)
4. Legal representative of one of the above persons
5. Other person(s) by court order (must provide recorded or certified copy of court order)

In the case of a deceased registrant, upon receipt of the death certificate of the decedent, a certification of the birth certificate can be issued to the spouse, child, grandchild, sibling, if of legal age, or to the legal representative of any of these persons as well as to the parent.

Any person of legal age may be issued a certified copy of a birth record (except for those birth records under seal) for a birth event that occurred over 100 years ago.

BIRTH RECORDS UNDER SEAL: Birth records under seal by reason of adoption, paternity determination or court order cannot be ordered in the usual manner. For a record under seal, write to:

BUREAU OF VITAL STATISTICS
ATTN: Records Amendment Section
P.O. BOX 210
Jacksonville, FL 32231-0042

REQUIREMENT FOR ORDERING: If applicant is self, parent, legal guardian or legal representative, the applicant must provide a completed application along with valid photo identification, if a mail request, a copy of the valid photo identification must be provided. If legal guardian, a copy of the appointment orders must be included with the request. If legal representative, the attorney bar number, and a notation of whom the attorney represents and that person's relationship to the registrant must be included with your request. If you are an agent of local, state or federal agency requesting a record, indicate in the space provided for "relationship" the name of the agency. Acceptable forms of identification are the following: Driver's License, State Identification Card, Passport and/or Military Identification Card.

If not one of the above, you must complete this application and have a notarized Affidavit to Release A Birth Certificate (DH Form 1958, 08/2010) submitted with your application for the birth record along with a copy of the registrant's valid photo identification as well as the applicant's valid photo identification.

RELATIONSHIP TO REGISTRANT: A person ordering his or her own certificate should enter "SELF" in this space. Also, explain if name has been changed; married name, name changed legally (when and where), etc. Others must identify themselves clearly as eligible (see ELIGIBILITY above).

NONREFUNDABLE: Vital record fees are nonrefundable.

APPLICANT'S SIGNATURE: Is required, as well as his/her printed name, residence address and telephone number.

PAYMENT: Cash, Credit Cards, Money Orders, Cashier's Checks or Bank Drafts; **Personal Checks** accepted only from Broward, Miami-Dade, and Palm Beach counties (name, address, and phone number must be imprinted on the check); **Official Business Checks** (business name, address, and phone number must be imprinted on the check).

Make payable to: Florida Department of Health in Broward County

ADDRESS ON CHECK AND PHOTO IDENTIFICATION MUST BE THE SAME

MAIL ORDERS: Regular mail orders must include a self-addressed, stamped envelope, and take 10 to 14 business days to process. All mail orders must include a copy of an acceptable form of Identification. Do not send cash by mail.

Mail to: Florida Department of Health in Broward County

Vital Statistics Department
780 SW 24th Street, Ft. Lauderdale, FL 33315-2643

PHONE or INTERNET ORDERS: Requires the use of a credit card. Requires Expedite and either Regular or Overnight Processing. Must include a copy of an acceptable form of Identification; Phone (866) 830-1906 or Internet <http://broward.floridahealth.gov/>

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