

**REQUEST FOR A PHOTOCOPY OF A PREVIOUSLY SUBMITTED  
APPLICATION TO CORRECT OR CHANGE A MICHIGAN VITAL RECORD**

If any information is unknown, please indicate "unknown". **Incomplete applications will be returned.**

**PART 1 - APPLICANT INFORMATION    Must be 18 years old or older**

Name: \_\_\_\_\_  
(First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last)

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PART 2 - ELIGIBILITY    Copy of valid identification is required. (See next page for details)**

- Self (My own record)                       I am the legal guardian of the person named on the record (Court Order Required)  
 Parent named on the record               My Client. I am a legally licensed representative of a person named on the record

**PART 3 - INFORMATION NEEDED TO LOCATE RECORD THAT WAS PREVIOUSLY CORRECTED/CHANGED**

Person Named on Record: \_\_\_\_\_ Date of Birth or Death: \_\_\_\_\_

Other Names Used:  Adoption  Legal Name Change  
(First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last)

Place of Birth or Death:  
(City and County) \_\_\_\_\_

Mother/Parent's Name: \_\_\_\_\_

Father/Parent's Name: \_\_\_\_\_

**PART 4 - PLEASE LIST TYPE OF CHANGE/CORRECTION PREVIOUSLY MADE TO RECORD**

\_\_\_\_\_

Approximate Date Requested: \_\_\_\_\_ Order Number: \_\_\_\_\_

**PART 5 - SIGNATURE REQUIRED TO PROCESS APPLICATION**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>For Regular Processing Mail Application, ID, and Fee to:</b> Vital Records Changes P.O. Box 30721 Lansing, MI 48909	<b>For RUSH Processing (Rush fee must be included) Mail Application, ID, and Fee to:</b> Vital Records Changes RUSH P.O. Box 30721 Lansing, MI 48909
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**PART 6 - PAYMENT** Check or Money Order made out to the "State of Michigan"      Application Fee is Non-Refundable

Application Fee:	\$12.00 (includes one copy)	\$12.00
Additional Copies:	\$12.00 each	\$
RUSH Fee:	\$12.00	\$
TOTAL ENCLOSED:		\$

## ELIGIBILITY

Must be at least 18 years old or legally emancipated. Legal guardians must include a copy of the court guardianship documents. Legally licensed representatives must provide documentation on official letterhead documenting that he/she represents the person named on the record and provide their state bar license number, along with attorney and client's identification.

## IDENTIFICATION REQUIREMENT

Do not send original documents they will not be returned to you.

To request a copy of an application used to make a change on a Michigan vital record, a current valid, government issued identification is required to establish eligibility.

Please send one of the following unexpired identifications:

- ✓ U.S. or U.S. Territories **Driver's License or Identification Card**
- ✓ U.S. or Foreign Passport
- ✓ U.S. Passport Card
- ✓ U.S. Military Identification Card with **both** picture and signature
- ✓ Other U.S. or U.S. Territories issued document that meets the following criteria: Document must be unexpired. Document must contain a photograph and at least the following information: name, date of birth, date of expiration, signature, and address.

If you do not have identification as listed above, we will accept other documents to prove your identity. For a list of alternative documents please visit our website at [www.michigan.gov/vitalrecords](http://www.michigan.gov/vitalrecords) or call our office at 517-335-8666.

## PROCESSING TIME

Prepaid self-addressed envelopes will NOT be used by our office.

Normal processing time for a copy of an application used to change a Michigan birth certificate is 5-6 weeks if all required documents are received. If we must contact you for additional documentation, the processing time starts when we receive everything needed. If you pay for RUSH service, processing time is 2-3 weeks from when everything is received. Processing time is not guaranteed. There could be situations out of our control that cause processing times to be longer.

Note: Applications sent to the Vital Records post office box with an overnight delivery are not received in Vital Records for three (3) days.

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs, or disability.

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