



FETAL DEATH CERTIFICATE REQUEST FORM EVENT OCCURRED IN THE LAST 5 YEARS ONLY

**FEE PER COPY
IS \$20.00**

Select one option if requesting in person: Pickup
*Fees collected are NON-REFUNDABLE Mail it to applicant

Certified Copy
You may establish identity with this type of copy

1 BABY INFORMATION (PRINT CLEARLY) BN#: _____ LRN: _____

First Name		Middle Name		Last Name		Date of Death	
City of Death – BERKELEY, CA No refund if record not found		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Mother's Maiden Name			No. of Copies
Father's/Parent's First Name			Father's/Parent's Middle Name		Father's/Parent's Last Name		
Mother's/Parent's First Name			Mother's/Parent's Middle Name		Mother's/Parent's Last Name		

2 APPLICANT INFORMATION (REQUESTOR) (PRINT CLEARLY)

Full Name of Applicant Requesting Record				YOUR Relationship to the stillborn?			
Address (Number, Street)				Apt#/Unit		Telephone Number ()	
City			State	Zip Code	Country (If outside of USA)		

3 INSTRUCTIONS

- Effective February 1, 2016, the Berkeley, Vital Records Office will only maintain records for 5 years from the date of the event.
- Certified copies of Fetal Death including Confidential Information portion can **ONLY** be issued to those persons identified in H&S Code Section 102430.
- Complete a separate application form for each baby.
- Complete the **Applicant Information** section and provide your signature where indicated. In the **Fetal Death Information section**, provide all the information available to identify the fetal death record. If the information you furnished is incomplete or inaccurate, we may not be able to locate the fetal death record.
- If no fetal death record is found, the non-refundable fee collected will be retained for searching the record (as required by law) and a **Certificate of No Public Record** will be issued to the applicant. If you are mailing your request, indicate the number of certified copies you wish and include the correct fee(s) in the form of a personal check, postal or bank money order (international money order only accepted for out-of-country request) made **payable to the City Of Berkeley**.

4 NOTICE

If you applied by mail and did not receive the requested certificate(s), you must file a claim with our office within 3 months of your original request. After 3 months, our office will not accept any claims of lost mail and you will have to submit another notarized request with the required fee.

5 CONTACT INFORMATION

Office of Vital Statistics
www.cityofberkeley.info/vitalstatistics/vitalrecords@ci.berkeley.ca.us
Telephone: (510) 981-5320 - Fax: (510) 981-5315

PLEASE LEAVE THIS SPACE BLANK

FOR VITAL STATISTICS USE ONLY