PUERTO RICO MAIL IN BIRTH CERTIFICATION APPLICATION

Instructions

Step 1: Establish eligibility. (Refer to Eligibility Information).
Step 2: Complete Birth Certification Application Form in its entirety, including the applicant’s signature section.
Step 3: Provide a photocopy of the applicant’s valid identification on both sides. All photocopies are required to be clear and legible. Received applications which don’t include an acceptable identification will not be processed. (Refer to Identification Requirements)
Step 4: Include copy of necessary documentation in order to establish kinship and/or use of married surname.
Step 5: Include the correct fee according to the requested certification. If a record isn’t on file or if the submitted application doesn’t comply with the requirements established in these instructions, a certified Not Found Statement will be issued. The application fee will not be refunded. (Refer to Payment and Fee Information)
Step 6: Mail in Application Form, Money Order, pre-addressed envelope, and all necessary documentation to the following address:
Demographic Registry of Puerto Rico
Fernandez Juncos Station
PO Box 11854
San Juan, PR 00910

Eligibility

In accordance with the definition of “interested party” as stated by Act No. 24 of April 22nd, 1931, as amended, known as the Puerto Rico Registry Act:

- Registered person (must be 18 years or older)
- Parent(s) as listed on the birth record
- Children of the registered person of 18 years of age or older (child must submit a copy of his/her birth certificate if not born in Puerto Rico)
- Legal representative of one of the aforementioned parts (must comply with the instructions issued in Circular Letter 1-2020)
- Legal guardian (must provide a certified copy [with seal] of the legal court order, submitted documents may be subject to a validation procedure by a court in Puerto Rico)
- Heir (must provide a certified copy of the Testament of Declaration, which may be subject to a validation procedure in Puerto Rico)

NOTE: Federal and State Agencies may obtain a Birth Registration Verification which will include limited information of the birth record. This issued document does not establish an identity, therefore it’s not considered a legal substitute of a birth certification. (Refer to Circular Letter 2-2019).

Identification Requirements for an eligible applicant when requesting a birth certification

The submitted identification must be current, possess the name of the identified person, their photo, signature, issuance and expiration date. If the married last name is used in the identification, it’s necessary to include a copy of the marriage certificate.

The following are the only acceptable forms of identifications:

- Passport
- Driver’s License issued by a state or a United States territory
- Identification Card issued by a state or an United States territory (DMV or DTOP)

Payment and Fees for a birth certification

In order to minimize the illegal use of birth certifications which could facilitate criminal behavior, such as fraud and identity theft, each registered person will have a limit of 3 copies within a 12 month period, which will be counted from the first issuance date of the aforementioned period. The limit of copies during the 12 month period doesn’t differ from the type of certification requested (computerized or photocopy of the original certificate).

<table>
<thead>
<tr>
<th>Computer Certification (Short Form)</th>
<th>Photocopy of the Original Certificate (Long Form)</th>
</tr>
</thead>
<tbody>
<tr>
<td>o First copy within the 12 month period $7.00</td>
<td>o First copy $17.00</td>
</tr>
<tr>
<td>o Second and third copy within the same 12 month period $12.00 each</td>
<td>o Second and third copy requested at the same time $12.00 each</td>
</tr>
</tbody>
</table>

Fee Exceptions

- The registered person of 60 years or older, who is a resident of Puerto Rico, may request one (1) birth certification free of charge during a period of 12 months.
- Puerto Rican Veterans are exempt from the fee when the requested certification is for official uses. The veteran must provide a copy of their DD-214 Form or other supporting evidence proving the applicant is a veteran and document attesting the official use of the requested certification. (Circular Letter OPVELA-2015-02)

Acceptable Payment Method

- Money Order addressed to the Secretary of Treasury of Puerto Rico. Personal checks are not accepted.
- The Demographic Registry of Puerto Rico isn’t responsible for payments made in cash, lost, misdirected or not delivered. Don’t Send Cash.

For the status of your application or additional information, contact us at (787) 765-2929 Ext. 6131 or at the following email segamientosolicitudexpcorreo@salud.pr.gov
Registro Demográfico • PO BOX 11854 San Juan, Puerto Rico 00910-11854 • www.salud.gov.pr • (787) 765-2929
**PUERTO RICO MAIL IN BIRTH CERTIFICATION APPLICATION FORM**

**PART 1 – APPLICANT INFORMATION**

<table>
<thead>
<tr>
<th>NAME</th>
<th>MIDDLE NAME</th>
<th>FIRST LAST NAME</th>
<th>SECOND LAST NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RESIDENTIAL ADDRESS</th>
<th>POSTAL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State or Country</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone Number</th>
<th>Mobile Number</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>( )</td>
<td>( )</td>
<td></td>
</tr>
</tbody>
</table>

**ELEGIBILITY** in accordance to with the definition of an “interested party” as stated by Act. No. 24 of April 22nd, 1931, as amended, known as the Puerto Rico Registry Act

- [ ] Registered person 18
- [ ] Mother
- [ ] Father
- [ ] Child
- [ ] Legal Representative
- [ ] Heir
- [ ] Legal guardian or appointed person by Court Order

**PART 2 – APPLICATION PURPOSE (A purpose must be selected based on the requested amount of certifications)**

- [ ] DRIVER’S LICENSE
- [ ] SOCIAL SECURITY
- [ ] HEALTH INSURANCE
- [ ] MARRIAGE LICENSE
- [ ] EMPLOYMENT
- [ ] JUDICIAL PROCEEDING
- [ ] PASSPORT/TRAVELING
- [ ] RETIREMENT
- [ ] SCHOOL
- [ ] NUTRITIONAL ASSISTANCE
- [ ] HOUSING
- [ ] OTHER: __________________________

**PART 3 – BIRTH RECORD INFORMATION**

<table>
<thead>
<tr>
<th>MONTH</th>
<th>DAY</th>
<th>YEAR</th>
<th>MUNICIPALITY</th>
<th>HOSPITAL OR ADDRESS WHERE BORN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEX</th>
<th>FATHER</th>
<th>MOTHER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

**PART 4 – ACCEPTABLE FORM OF IDENTIFICATION**

- [ ] Driver’s License
- [ ] State or US territory issued identification card
- [ ] Passport
- [ ] Other: __________________________

- [ ] Include a photocopy of the identification on both sides. (Refer to Identification Requirements)

**PART 5 – APPLICANT’S SIGNATURE**

- [ ] Signature: ________________________ Date: __________

**PART 6 – FEES AND TYPE OF CERTIFICATION REQUESTED**

Every registered person has a limit of 3 copies during a 12 month period which doesn’t differ from the certification type (Short or Long Form).

<table>
<thead>
<tr>
<th>Computer Certification Fee (Short Form)</th>
<th>Number of Copies</th>
<th>Photocopy of the Original Certificate Fee (Long Form)</th>
<th>Number of Copies</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] First copy within the 12 month period $7.00</td>
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<tr>
<td>[ ] Second and third copy within the 12 month period $12.00 each</td>
<td></td>
<td>[ ] Second and third copy $12.00 each</td>
<td></td>
</tr>
<tr>
<td>[ ] Registered person of 60 years or older resident of Puerto Rico (Refer to instructions on page 1)</td>
<td></td>
<td>[ ] Puerto Rican Veteran (Include evidence – Refer to instructions on page 1)</td>
<td></td>
</tr>
</tbody>
</table>

*The application fee will not be refunded.* If a record isn’t found a certified Not Found Statement will be issued.

**FOR OFFICIAL USE OF THE DEMOGRAPHIC REGISTRY ONLY**

**Date mail was received:**

**Date received by the issuance division:**

**Name of the employee who received the correspondence:**

**Included documentation as part of the application:**

- [ ] Applicant’s birth certificate
- [ ] Applicant’s marriage certificate
- [ ] Copy of applicant’s ID
- [ ] Other: __________________________

**Documentation:**

- [ ] DD-214 Form or supporting documentation for a Puerto Rican veteran exemption

**Security Form Numbering:**

1. __________ 2. __________ 3. __________

**Employee Name:**

**Signature:**

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For the status of your application or additional information, contact us at (787) 765-2929 Ext. 6131 or at the following email seguimientosolicitudexpcorreo@salud.pr.gov

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