Washington State Department of HEALTH

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

DOH 422-310 November 2026

Application to Amend a Birth Certificate

Is This the Right Form?

Use this form to amend (officially fix or update) items on a birth certificate. Do **NOT** use this form for:

- Changing a sex designation for reasons other than a data entry error.
- Registering an adoption.
- Adding, removing, or replacing a parent on the certificate.
- Legally changing your name.

To learn how to make these changes, visit our website at www.doh.wa.gov/vitalrecords.

Who Can Ask for Amendments?

If the child on the certificate is under age 18: Only the parents listed on the certificate or a legal guardian appointed by the court may ask for updates to the certificate.

If the child on the certificate is 18 or older, or legally emancipated: Only the person named as the child on the birth certificate or a legal guardian appointed by the court may ask for updates to the certificate.

How to Apply

1. Have the current (incorrect) certificate with you while filling out this application.
2. Gather your supporting proof documents.
3. Fill out the application using blue or black ink.
    - All fields are required.
    - You can type on it using your computer or print it and write by hand.
4. Make a copy of the photo ID for every person who signs the application.
5. Put these items in an envelope:
    - Pages 3 and 4 of the application.
    - Copies of government-issued IDs for everyone who signed.
    - Your supporting proof documents – See Guide on Supporting Proof Documents (PDF).
    - Your proof that you qualify, if needed – See Guide on Proving You Qualify (PDF).
6. Mail everything to:

    Center for Health Statistics
    Attn: Amendments
    PO Box 47814
    Olympia, WA 98504-7814

Common Questions

Can I use one document for more than one thing?

Yes. One document can prove who you are, prove how you are related, or give the correct information for the change. For example, a passport can prove your identity and give the correct spelling to update a name.

What does a supporting proof document do?

A supporting proof document proves the amendment you want made. Because we need to link the amendment to the person, proof documents must show the full name and date of birth for the person whose information you want to amend.

Some examples of what we can accept include:

- Passport
- REAL ID compliant driver's license or ID card
- Birth, marriage, or divorce certificate
- Certificate of Naturalization
- Permanent resident card (I-551)
- Military record (DD-214)
- Hospital or medical record
- Health or life insurance policy
- Official school transcripts
- Government benefit record (such as Medicaid or social services)
- Social Security Abstract

Proof documents we do NOT accept:

- Driver's license or ID card that is **not** REAL ID compliant
- Social Security card
- Decorative hospital birth certificate
- Family Bible

See the Guide on Supporting Proof Documents (PDF) for more information on supporting proof documents.

Will you send me a new certificate after finishing the amendment?

We do not automatically send out certificates after an amendment. We will mail you a confirmation letter that the amendment was made with next steps for ordering a certificate.

You **can exchange or order** a certificate **at the same time** as you ask for an amendment **by sending both in the same envelope**. Your ID and proof you qualify for the amendment can also be used for the certificate exchange or purchase. We will mail new certificates after the amendment is made.

Free Exchange – Certificate issued less than 1 year ago

If you have a certificate that was issued by the Washington State Department of Health or a Washington State local health department within the last year, we will exchange it for free. The issue date is usually found in the upper-right corner of the certificate.

- Send us the certificates to exchange with the amendment application.

Order and Pay - Certificate issued more than 1 year ago

If the certificate was issued more than a year ago, you must buy a new one.

- Send us a completed birth certificate order form (PDF) and payment with this application. Make sure to use the updated information on the order form and follow the instructions to avoid delays.

Questions or Application Status?

Website: www.doh.wa.gov/CertificateCorrections
Email: VitalRecordsCorrections@doh.wa.gov
Phone: 360-236-4300, Monday – Friday 9:00 a.m. to 2:00 p.m.

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Mail to:
Center for Health Statistics
PO Box 47814
Olympia, WA 98504-7814

Application to Amend a Birth Certificate

Information About You

First Name **Middle Name** **Last Name**

_____ _____ _____

Your Relationship with the Child on the Certificate

◯ Self ◯ Parent ◯ Legal Guardian

Your Mailing Address

PO Box or Street address Unit Number City State Zip code

_____ _____ _____ _____ _____

Your Contact Information

Phone number (U.S. only) Email address

_____ _____

Information Currently Shown on the Certificate

We use this information to locate the record. Please make sure to use what is on the certificate now.

Information About the Child

First Name Middle Name Last Name

_____ _____ _____

Date of Birth City or County of Birth

_____ _____

Mother or Parent 1 Name

First Middle Last

_____ _____ _____

Father or Parent 2 Name

First Middle Last

_____ _____ _____

Tell Us the Updates You Want Made

What's wrong? ⟶ (Example: child first name)	**The certificate now shows:** ⟶ (Example: Jon)	**The certificate should show:** (Example: Jonathan)
Wrong item 1	Now shows	Should show
Wrong item 2	Now shows	Should show
Wrong item 3	Now shows	Should show
Wrong item 4	Now shows	Should show
Wrong item 5	Now shows	Should show

Authorize Your Request

By signing this form, I declare under penalty of perjury under the laws of the state of Washington that the information I provided is true and correct.

Your Signature **Date Signed**

Second Parent Signature, only if required **Date Signed**

Application checklist:

- ☐ All sections of the application are complete, including required signatures and date signed.
- ☐ I included a copy of my required identity documents.
- ☐ I included a copy of the proof documents required to update the certificate.
- ☐ I included a copy of my proof of relationship with the person on the certificate, if required.

Stop! This section is for state vital records office use only.

State File Number	Fee Number	Initial	Date	Application Number