



Vital Records Birth/Death Application

A photocopy of a government, school or employer photo identification of the **applicant** must be submitted with all requests. Applications without proper identification will be returned unprocessed.

Name of applicant: _____ Day phone number: _____
Address: _____
City: _____ State: _____ Zip code: _____
E-mail address: _____

Address certificate to be mailed to if different than applicant's address:

Name: _____
Address: _____
City: _____ State: _____ Zip code: _____

Your relationship to person named on the certificate. (Check one)

____ Self ____ Adult child ____ Family member (specify) _____
____ Parent ____ Guardian ____ Legal representative (for whom?) _____

For what purpose are you requesting this certificate? _____

By signing this application, I understand that making a false application for a vital record is a felony under state law.

Signature of applicant: _____
Printed name of applicant: _____

BIRTH CERTIFICATES

Full name: _____
First Middle Last Suffix
Date of birth: _____ Sex: _____ City of birth: _____ County of birth: _____
Name of mother prior to any marriage: _____
First Middle Last
Name of father: _____
First Middle Last
Were parents married at time of birth: ____ Yes ____ No Number of children born in SC to this mother? _____
Name at birth if ever changed for any reason other than marriage: _____
Specify the number and type of certification(s) requested:
____ Birth long (\$12) ____ Additional long (\$3 each) ____ Birth short (\$12) ____ Additional short (\$3 each)
Total fees submitted: _____ ____ Expedite Additional \$5

DEATH CERTIFICATES

Name of deceased: _____
First Middle Last Suffix
Date of death: _____ Age at death: _____ Social security number _____
Sex: _____ City of death: _____ County of death: _____
Specify the number and type of certification(s) requested:
____ Death long (\$12) ____ Additional long (\$3 each) ____ Death short (\$12) ____ Additional short (\$3 each)
____ Death statement (\$12) ____ Additional statement (\$3 each)
Total fees submitted: _____ ____ Expedite Additional \$5

Send completed application/photocopy of identification to: SC DHEC – Vital Records
2600 Bull Street, Columbia, SC 29201

OFFICE USE ONLY

Date received: _____	BC SFN _____ R/F _____	DC SFN _____ R/F _____
BC 1st Search _____	BC Issue Date _____	1st Search _____ DC Issue Date _____
BC 2nd Search _____	DCN _____	2nd Search _____ DCN _____
LOC _____	_____	DNL _____
NFL/DNL _____	_____	_____

Vital Records Application for Birth and Death Certificates

Instructions and Information

- 1) One form may be used to request a certified copy of a birth certificate only, or a certified copy of a death certificate only, or a certified copy of a birth and death certificate if for the same individual.
- 2) Complete all of the information in the top section of the form and all information in the birth and/or death sections based upon whether a birth, death or both certificate(s) are being requested.

Information

BIRTHS AND DEATHS – SC Law did not require the filing of birth and death records until January 01, 1915. No birth or death records on file at SCDHEC (county or state) are available for public viewing.

A death record becomes public record fifty (50) years after the date of death. Non-certified copies of public death records are issued unless a certified copy is specifically requested. The \$12 "search fee" is required for each request of a public death record.

Death records are available for public viewing fifty (50) years after the date of death ONLY at the SC Department of Archives and History, 8301 Parklane Road, Columbia, 29223, website: <http://archives.sc.gov>.

TURNAROUND TIME – The usual turnaround time for 'waiting' on-site customers is approximately thirty (30) minutes during non-peak hours (8:30 am - 11:00 am and 2:00 pm - 4:00 pm). The usual turnaround time for 'mail' requests is approximately three (3) weeks from the date of receipt. Expedited requests are processed and a response provided within 3 business days of receipt. The expedite fee is an additional \$5.00 for a birth and/or death request.

If it has been more than four (4) weeks since you submitted your request, call (803) 898 3630 to determine the status.

IDENTIFICATION – A valid/current government, school or employer issued photo identification document of the **applicant** is required before a search of the records will be conducted. Requests that do not contain proper identification will be returned unprocessed. Acceptable documents are:

1. Any United States' DMV Office issued picture identification i.e. Driver's License, ID card, Learner's Permit (unexpired)
2. Current school or employer picture identification card
3. Military card (unexpired – active duty or retired member)
4. United States Passport (unexpired)
5. Foreign Passport with Visa (I-94 or I-94W – unexpired)
6. Re-Entry Permit (I-327 – unexpired)
7. Refugee Travel Document (form I-571 – unexpired)
8. United States Citizen Identification Card (form I-197)
9. Temporary Resident Card (form I-688 – unexpired)
10. Permanent Resident Card (form I-551 – unexpired)
11. Weapon or gun permit issued by federal, state or municipal government (unexpired)

Website – www.scdhec.gov/vr/ provides additional information on SC Vital Records.

PAYMENT – Acceptable methods of payment for mail requests are a money order or cashier's check made payable to SC DHEC. Onsite customer service also accepts credit and debit cards and cash.

SEARCH FEE – A \$12 "search fee" is required by law. **If the record is not found, the \$12 search fee is non-refundable.** The required search fee includes one (1) certification, if record is located. If additional copies of the same type certification are ordered at the same time, additional copies are \$3 each.

TYPE OF CERTIFICATIONS

Birth Long contains parentage

Birth Short/Wallet does not include parentage

Death Long includes cause of death

Death Short does not include cause of death

Death Statement only includes fact of death