

## Would you Like to Order a Florida Fetal Death Certificate?

A Certificate of Fetal Death is filed whenever the fetus dies before birth and the fetus is 20 weeks or more gestation

### Eligibility Requirements for Certification

Cause of death, along with information on the parents, marital status, and medical details are confidential under law, s. 382.015(5), 382.025 (2)(a)(1), F.S. The named parents must provide a written application and valid government issued photo identification (e.g. driver's license, passport, military ID, state issued ID) to determine their eligibility in obtaining the certification of the entire fetal death certificate. A certification without the confidential information is available to anyone and there are no ID requirements.

### How to Apply

The fee for a certification of a Fetal Death is \$5 and \$4 for additional copies ordered at the same time. Check or money order should be made payable to Vital Statistics and must be in U.S. currency if an international order. Florida law imposes an additional service charge of \$15 for bank returned checks.

Vital record fees are nonrefundable, with one exception. Fees paid for additional copies when no record is found will be refunded upon written request.

**By Mail or Credit Card** – for an application and information on ordering a certification of a fetal death, please see the Florida Vital Statistics website at: [www.doh.state.fl.us/planning\\_eval/vital\\_statistics/index.html](http://www.doh.state.fl.us/planning_eval/vital_statistics/index.html)

## Other Vital Statistics Services

We also offer Certifications of Florida Events: Birth, Death, Marriage, and Divorce

### Questions?

Telephone: (904) 359-6900

Adoptions	ext. 9001
Amendments, Corrections	ext. 9005
Apostille	ext. 1024
Cause of Death, Medical	ext. 9013
Client Services (certifications)	ext. 9000
Delayed Birth	ext. 9003
Legal Name Change	ext. 9005
Paternity	ext. 9004
Presumptive Death	ext. 9005

or write to:

Office of Vital Statistics  
Post Office Box 210  
Jacksonville, Florida  
32231-0042



The Florida Department of Health



\*In commemoration of Katherine's Law  
[www.KatherinesLaw.org](http://www.KatherinesLaw.org)

DH 150-933, 11/06

Department of Health  
Office of Vital Statistics

# How to Apply for a Florida Certificate of Birth Resulting in Stillbirth

s 382.0085, F.S.





## Florida Certificate of Birth Resulting in Stillbirth

In 2006, the Florida State Legislature established a new certificate entitled Certificate of Birth Resulting in Stillbirth (section 382.0085, Florida Statutes).

For any stillborn child in Florida, the department will issue a Certificate of Birth Resulting in Stillbirth upon the request of a parent named on a fetal death certificate. There must be a fetal death certificate on file with the Florida Office of Vital Statistics in order for a Certificate of Birth Resulting in Stillbirth to be prepared. The Certificate of Birth Resulting in Stillbirth is not proof of live birth and may not be used to establish identity. Gestation must be 20 weeks or more.

The funeral director shall advise the parent(s) of a fetal death:

- That they may request a Certificate of Birth Resulting in Stillbirth in addition to the fetal death certificate.
- How to contact the Office of Vital Statistics to request such a certificate and that once a Certificate of Birth Resulting in Stillbirth has been issued, that stillbirth certificate becomes public record and it is not confidential.

## Eligibility Requirements for Certification

The first request for a Certificate of Birth Resulting in Stillbirth must meet the eligibility requirements for the fetal death certificate which includes the confidential portions of the record. The named parent(s) must provide a written application and valid government issued photo identification, such as driver's license, military ID, passport, state issued ID. This documentation is required to determine their eligibility in obtaining the fetal death certificate.

A Florida Certificate of Fetal Death must be on file before the Certificate of Birth Resulting in Stillbirth certificate can be issued. Statute defines a fetal death as one in which the 20th week of gestation has been reached.

## How to Apply

The fee for a certification of a Certificate of Birth Resulting in a Stillbirth is \$9; additional copies are \$4 each if ordered at the same time. Check or money order should be made payable to Vital Statistics and must be in U.S. dollars if an international order. Florida law imposes an additional service charge of \$15 for bank returned checks.

**1.) In Person:** Office of Vital Statistics  
1217 Pearl Street  
Jacksonville, FL 32202  
Hours of operation are Monday-Friday,  
8:00 am – 4:30 pm

**2.) By Mail** – Complete the convenient order form inside this brochure. If this is the initial request, the parent must include a copy of the applicant's valid government issued photo ID, such as driver's license, passport, state or military issued ID.

The certification will be mailed within **7 – 10 days of receipt**; same day service is not available for this request.

RUSH service is provided for an additional \$10. Your order will be processed within 3 work days of receipt. Please write RUSH on the outside of the envelope.

**3.) By Credit Card** – if you wish to pay by credit card, you may use VitalChek, a private firm approved by the state to process all credit card orders. VitalChek charges a \$5 processing fee plus the \$10 RUSH fee as mentioned above.

For more VitalChek information:  
**Call 1 (877) 550-7330 OR Fax 1 (877) 550-7428**  
**(Fax request must include a credit card number)**

For return overnight service (e.g. FEDEX, DHL, US Postal Express) an additional service fee will be applied and applicant must provide a physical address; a P.O. Box will not be accepted.

## Application

for Certificate of Birth Resulting in Stillbirth  
(First copy is \$9; additional copies are \$4 each  
if ordered at the same time)

### REGISTRANT:

Full Name on State Record Sex

Date of Event City or County of Event

Name of Hospital or Birthing Facility

Mother's Full MAIDEN Name

Father's Full Name

### APPLICANT:

Name

Signature of Applicant

Relationship to Registrant (**mother, father**)

/ \$

Number of copies ordered/Amount of money enclosed

### APPLICANT'S MAILING ADDRESS:

Street Address Apt. No.

City, State, Zip

Telephone (**daytime**)

Tear off the above application and mail with payment to:  
Office of Vital Statistics  
Attn: Client Services  
P.O. Box 210  
Jacksonville, FL 32231-0042