PETITION TO ESTABLISH
DELAYED
BIRTH CERTIFICATE

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1

FOR USE <u>ONLY AFTER</u> VITAL RECORDS HAS REJECTED REQUEST

FORMS and INSTRUCTIONS

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CVDB1 - **5518** - 010119

PETITION FOR COURT ORDER TO ESTABLISH DELAYED BIRTH CERTIFICATE

CHECKLIST

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You may use these forms if . . .

- ✓ You want the Court to issue an Order to the Office of Vital Records to establish a birth certificate for a person born in Arizona who is at least one year old, ***AND***
- ✓ The Arizona Office of Vital Records does not have a birth record for the person for whom the certificate is requested, ***AND***
- ✓ **You first applied for a delayed birth certificate to the Office of Vital Records**, ***AND***
  1. **The request was rejected**, ***AND***
  2. **You received a *letter of denial* from Vital Records** to file with this request to the Court.

You may NOT use these forms if . . .

- ✖ **The person was not born in Arizona, or**
- ✖ **The person's birth is registered in another state or country,**
- ✖ **You have not first:**
  1. **applied to Vital Records,**
  2. **been rejected,** *and*
  3. **received a letter of denial from that office *to file with* this Petition.**

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Law Library Resource Center website.

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Law Library Resource Center

PETITION FOR COURT ORDER FOR DELAYED BIRTH CERTIFICATE

This packet contains court forms and instructions to file a petition for a Court Order to establish a delayed birth certificate for a person more than one year old. Items in ***BOLD*** are forms that you will need to file with the Court. Non-bold items are instructions or procedures. Do ***not*** copy or file those pages!

Order	File Number	Title	# Pages
1	CVDB1k	Checklist: "*You may use these forms if . . .*"	1
2	CVDB1t	Table of Contents (this page)	1
3	CVDB10i	Instructions: How to Fill Out Forms to Request Delayed Birth Certificate	1
4	CV10f	***"Civil Cover Sheet"***	2
5	CVDB11f	***"Petition for Order to Establish Delayed Birth Certificate"***	2
6	CVDB15f	***"Consent and Waiver of Notice"*** (for guardian and living parents, if applicable), (copy before filling out if more than 1 needed)	2
7	CVDB24f	***"Affidavit of Service by Certified Mail"*** (if applicable)	1
8	CVDB81f	***"Court Ordered Delayed Birth Registration Form"*** (and instructions)	3
9	CVDB82f	***"Court Order"***	1
10	CVDB10p	PROCEDURES: What to do after you have completed all forms	3

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INSTRUCTIONS: HOW TO FILL OUT THE FORMS TO REQUEST A DELAYED BIRTH CERTIFICATE

FOR ALL FORMS: TYPE OR WRITE CLEARLY. USE BLACK INK.

CIVIL COVER SHEET

- **CASE NUMBER:** Leave blank. The case number will be stamped on the papers at the time of filing.
- **ATTORNEY NAME AND BAR NUMBER:** Fill in only if an attorney represents the Petitioner.
- **PLAINTIFF'S NAME**: Write in the name of the person needing the delayed birth certificate.
- **DEFENDANT'S NAME:** Leave blank. Does not apply.
- *On page* **2**, check box **#178**, beside "**Delayed Birth Certificate**".
- **Rule 26.2 DISCOVERY TIER, EMERGENCY ORDER SOUGHT, and COMMERCIAL COURT**. Leave blank. Does not apply.

Note that you do not need to make extra copies of this form.

PETITION FOR ORDER TO ESTABLISH DELAYED BIRTH CERTIFICATE

1. **In the top left corner**, write in the information requested about the person FILING the form. If you are a parent or a legal guardian filing on behalf of the Petitioner, the person for whom the delayed birth certificate is needed, write in this information as it applies to you.

2. **In the Matter of . . .** Write in the name of the person for whom the delayed birth certificate is needed. Leave "**Case Number"** blank. This will be stamped on the papers at time of filing.

3. **Check the appropriate box** to indicate **if** you are a parent or legal guardian filing on behalf of the person needing the delayed birth certificate (If you are filing on your own behalf, **do not** check anything).

4. **Write in the information about the person for whom the delayed birth certificate is needed.**

5. **REQURED STATEMENTS TO THE COURT. EACH OF THESE STATEMENTS MUST BE TRUE. Arizona law** (A.R.S. §36-333.03) **requires that each of these statements must be true for the Court to issue an Order to establish a delayed birth certificate.**

6. **Sign the Petition** in the presence of a Notary Public or a Deputy Clerk of Superior Court at the filing counter. By signing the Petition, you are stating under penalty of perjury that the information you have provided is true.

COURT ORDERED DELAYED BIRTH REGISTRATION FORM

- **COMPLETE PAGE 1, PARTS 1, 2, AND 3.** Leave part 4 blank.
- **WRITE THE INFORMATION EXACTLY AS IT SHOULD APPEAR ON THE BIRTH CERTIFICATE.**
- ***EVERY LETTER ON THIS FORM MUST BE ABSOLUTELY CLEAR AND LEGIBLE:*** **NO CROSS-OUTS. NO WRITE-OVERS. NO ERASURES. NO CORRECTION FLUID ("White Out", etc.).**
- **COMPLETE PAGE 2, SECTIONS A, B, AND C, by circling the appropriate listings to indicate the race, Hispanic origins, and/or Tribal Community of the person needing the delayed birth certificate.**

WHEN YOU HAVE COMPLETED THESE FORMS, GO TO THE "PROCEDURES" PAGE
(the last document in this packet) **AND FOLLOW THE STEPS LISTED.**

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In the Superior Court of the State of Arizona

In and For the County of _____

Case Number _____

CIVIL COVER SHEET- NEW FILING ONLY
(Please Type or Print)

Plaintiff's Attorney _____

Attorney Bar Number _____

Is Interpreter Needed? ☐ **Yes** ☐ **No**

If yes, what language(s):

_____

_____

Plaintiff's Name(s): (List all) Plaintiff's Address: Phone #: Email Address:

_____

_____

_____

(List additional Plaintiffs on page two and/or attach a separate sheet).

Defendant's Name(s): (List All)

_____

_____

_____

(List additional Defendants on page two and/or attach a separate sheet)

RULE 26.2 DISCOVERY TIER OR MONETARY RELIEF CLAIMED:

IMPORTANT: Any case category that has an asterisk (*) MUST have a dollar amount claimed or Tier selected. State the monetary amount in controversy or place an **"X"** next to the discovery tier to which the pleadings allege the case would belong under Rule 26.2.

☐ Amount Claimed $_____ ☐ Tier 1 ☐ Tier 2 ☐ Tier 3

NATURE OF ACTION

Place an **"X"** next to the **one** case category that most accurately describes your primary case. **Any case category that has an asterisk (*) MUST have a dollar amount claimed or Tier selected as indicated above**.

100 TORT MOTOR VEHICLE:

☐ 101 Non-Death/Personal Injury*

☐ 102 Property Damage*

☐ 103 Wrongful Death*

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110 TORT NON-MOTOR VEHICLE:

- ☐ 111 Negligence*
- ☐ 112 Product Liability – Asbestos*
- ☐ 112 Product Liability – Tobacco*
- ☐ 112 Product Liability – Toxic/Other*
- ☐ 113 Intentional Tort*
- ☐ 114 Property Damage*
- ☐ 115 Legal Malpractice*
- ☐ 115 Malpractice – Other professional*
- ☐ 117 Premises Liability*
- ☐ 118 Slander/Libel/Defamation*
- ☐ 116 Other (Specify) _____*

120 MEDICAL MALPRACTICE:

- ☐ 121 Physician M.D.*
- ☐ 122 Physician D.O*
- ☐ 123 Hospital*
- ☐ 124 Other*

130 & 197 CONTRACTS:

- ☐ 131 Account (Open or Stated)*
- ☐ 132 Promissory Note*
- ☐ 133 Foreclosure*
- ☐ 138 Buyer-Plaintiff*
- ☐ 139 Fraud*
- ☐ 134 Other Contract (i.e. Breach of Contract)*
- ☐ 135 Excess Proceeds-Sale*
- ☐ Construction Defects (Residential/Commercial)*
  - ☐ 136 Six to Nineteen Structures*
  - ☐ 137 Twenty or More Structures*
- ☐ 197 Credit Card Debt (Maricopa County Only)*

150-199 OTHER CIVIL CASE TYPES:

- ☐ 156 Eminent Domain/Condemnation*
- ☐ 151 Eviction Actions (Forcible and Special Detainers)*
- ☐ 152 Change of Name
- ☐ 153 Transcript of Judgment
- ☐ 154 Foreign Judgment
- ☐ 158 Quiet Title*
- ☐ 160 Forfeiture*
- ☐ 175 Election Challenge
- ☐ 179 NCC-Employer Sanction Action (A.R.S. §23-212)
- ☐ 180 Injunction against Workplace Harassment
- ☐ 181 Injunction against Harassment
- ☐ 182 Civil Penalty
- ☐ 186 Water Rights (Not General Stream Adjudication)*
- ☐ 187 Real Property *
- ☐ Special Action against Lower Courts
  (See Lower Court Appeal cover sheet in Maricopa)
- ☐ 194 Immigration Enforcement Challenge
  (A.R.S. §§1-501, 1-502, 11-1051)

150-199 UNCLASSIFIED CIVIL:

- ☐ Administrative Review
  (See Lower Court Appeal cover sheet in Maricopa)
- ☐ 150 Tax Appeal
  (All other tax matters must be filed in the AZ Tax Court)
- ☐ 155 Declaratory Judgment
- ☐ 157 Habeas Corpus
- ☐ 184 Landlord Tenant Dispute – Other*
- ☐ 190 Declaration of Factual Innocence (A.R.S. §12-771)
- ☐ 191 Declaration of Factual Improper Party Status
- ☐ 193 Vulnerable Adult (A.R.S. §46-451)*
- ☐ 165 Tribal Judgment
- ☐ 167 Structured Settlement (A.R.S. §12-2901)
- ☐ 169 Attorney Conservatorships (State Bar)
- ☐ 170 Unauthorized Practice of Law (State Bar)
- ☐ 171 Out-of-State Deposition for Foreign Jurisdiction
- ☐ 172 Secure Attendance of Prisoner
- ☐ 173 Assurance of Discontinuance
- ☐ 174 In-State Deposition for Foreign Jurisdiction
- ☐ 176 Eminent Domain– Light Rail Only*
- ☐ 177 Interpleader– Automobile Only*
- ☐ 178 Delayed Birth Certificate (A.R.S. §36-333.03)
- ☐ 183 Employment Dispute- Discrimination*

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☐ 185 Employment Dispute-Other*
☐ 196 Verified Rule 45.2 Petition
☐ 195(a) Amendment of Marriage License
☐ 195(b) Amendment of Birth Certificate

☐ 163 Other*
_____
(Specify)

EMERGENCY ORDER SOUGHT

☐ Temporary Restraining Order ☐ Provisional Remedy ☐ OSC ☐ Election Challenge

☐ Employer Sanction ☐ Other (Specify) _____

COMMERCIAL COURT (Maricopa County Only)

☐ This case is eligible for the Commercial Court under Rule 8.1, and Plaintiff requests assignment of this case to the Commercial Court. More information on the Commercial Court, including the most recent forms, are available on the Court's website at:

https://www.superiorcourt.maricopa.gov/commercial-court/.

Additional Plaintiff(s):

_____

_____

Additional Defendant(s):

_____

_____

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Person Filing: (1)_____
Address (if not protected):_____
City, State, Zip Code:_____
Telephone:_____
Email Address:_____
Lawyer's Bar Number:_____

Representing ☐ **Self, without a Lawyer** **or** ☐ **Attorney for** ☐ **Petitioner** **OR** ☐ **Respondent**

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

(2) In the Matter of

Case No. _____

_____
(Name of person for whom birth certificate is requested)

PETITION FOR ORDER TO ESTABLISH DELAYED BIRTH CERTIFICATE
A.R.S. § 36-333

(3) I petition the Court on my own behalf, or as ☐ **parent** **or** ☐ **legal guardian, to issue an Order to the State Registrar** (Office of Vital Records) **to establish a** (delayed) **birth certificate for the person named below,**

(4) First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: **Month** _____ **Date** _____ **Year** _____

Place of Birth: _____ **, ARIZONA**
City (if applicable) / **County**

(5) STATEMENTS TO THE COURT: ALL of the following are true statements:

- The person for whom the delayed birth certificate is requested was born in the state of Arizona.
- The person's birth is not registered in another state or country.
- No record of the person's birth can be found in this State's Vital Records.
- Despite diligent efforts, the Petitioner was unable to obtain the information and evidentiary documents required for the creation and registration of a delayed birth certificate.

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- The State Registrar has refused to create and register a delayed birth certificate and the letter of denial received from the State Office of Vital Records is filed with this petition.

(6) OATH OR AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct.

_____ _____
Date Signature

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal) _____
Deputy Clerk or Notary Public

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Person Filing: _____
Address (if not protected):_____
City, State, Zip Code:_____
Telephone:_____
Email Address:_____
Lawyer's Bar Number:_____

Representing ☐ **Self, without a Lawyer or** ☐ **Attorney for** ☐ **Petitioner OR** ☐ **Respondent**

SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY

In the Matter of:

Case Number: _____

CONSENT TO ESTABLISHMENT OF DELAYED BIRTH CERTIFICATE AND WAIVER OF NOTICE

_____
Name of Person for Whom Delayed Birth Certificate is Requested

REQUIRED INFORMATION, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME:

Name _____
Address _____
Telephone: _____
Date of Birth: _____
Month Day Year

☐ **I am the parent of the person for whom the Delayed Birth Certificate is requested, or**

☐ **I am the legal guardian of the person for whom the Delayed Birth Certificate is requested.**

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2. I have read the **Petition to Establish a Delayed Birth Certificate** and consent to the establishment of the Certificate as stated in the **Petition**, naming the following persons as parents of the petitioner:

(Father) First	Middle	Last Name

(Mother) First	Middle	Last Name

3. I waive notice of all further proceedings in this matter.

I swear or affirm the contents of this document are true and correct.

_____ _____
Date Signature of Non-Petitioning Parent or Legal Guardian

_____
Printed Name

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal) _____
Deputy Clerk or Notary Public

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Person Filing: _____
Address (if not protected):_____
City, State, Zip Code:_____
Telephone:_____
Email Address:_____
Lawyer's Bar Number:_____

For Clerk's Use Only

Representing ☐ **Self, without a Lawyer or** ☐ **Attorney for** ☐ **Petitioner OR** ☐ **Respondent**

SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY

(2) In the Matter of

_____
(Name of person needing birth certificate)

Case No. _____

AFFIDAVIT OF SERVICE BY CERTIFIED MAIL
REGARDING PETITION FOR DELAYED BIRTH CERTIFICATE A.R.S. § 36-333

1. I am familiar with the facts stated in this Affidavit, and I make this Affidavit to show that I have served copies of the ***"Petition to Establish Delayed Birth Certificate"*** and the ***"Notice of Hearing Regarding Petition to Establish Delayed Birth Certificate"*** on the person named below by certified mail/restricted delivery, return receipt requested.

   Person served (name of other party): _____

   Address where other party was served: _____

   _____

   Date of receipt by the other party: _____

2. The **Petition** and **Notice** listed above were received by the other party as shown by the receipt, the original of which is attached to this Affidavit on a separate piece of paper.

The contents of this document are true and correct to the best of my knowledge and belief.

_____ Date

_____ Signature of Sender

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

_____
Deputy Clerk or Notary Public

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Court Ordered Delayed Birth Registration

Instruction Guide

Who Can Petition the Court For a Court Ordered Delayed Registration?

1. Pursuant to Arizona Revised Statute 36-333.02 and 36-333.03, an individual who has applied for a delayed birth registration with the Office of Vital Records and has received a letter of denial may petition the court for a court order.

What Information Should be Presented to the Court?

1. The denial letter issued by the State Office of Vital Records, the information and evidentiary documents submitted to the Office of Vital Records must be submitted to the court.

How to Complete the Court Ordered Delayed Birth Registration Form

1. The registrant's birth facts must be entered in Part 1. Please complete the information on the form* as it is to appear on the delayed birth record. Information entered should be supported by evidence.
   All fields on the form must be completed.
   **This form can be located at the following website:*
   http://www.azdhs.gov/vital-records/manuals/documents/forms/court-ordered-delayed-birth-registration.pdf

2. The information entered on the form must be typed. Do not use cross-outs, write-overs, erasures, correction fluid, or correction tape. If a mistake is made a new form must be prepared.

3. Use Sections A-C on the reverse side of the form to complete information concerning Race, Hispanic Origin and Tribal Community.

4. The natural parents' information must be entered in Part 2.

5. Part 3 must contain the information regarding the documentary evidence and other information used to support the court order. Documentary evidence means written information established by an independent source which is used to prove the fact for which it is presented. Please use the documentary evidence and information section to capture this information.

6. In Part 3, "registrant" means an individual who is 18 years of age or older or an individual emancipated by marriage or by a court order and has applied for the delayed birth registration with the Office of Vital Records. "Other" means an individual other than the registrant such as a parent, or legal guardian, who applied for a delayed birth registration on behalf of the registrant because the registrant was less than 18 years of age.

7. The form must be reviewed for accuracy by the petitioner and court personnel. The petitioner must print and sign their name as indicated in Part 3. After the information contained on the form has been verified to be accurate, the form is ready for the final stage, certification.

8. Part 4: Certification of Clerk of Court - this section must be completed by the clerk of the court where the legal proceeding was finalized. The clerk must sign where designated and the court's seal/certification must be placed on the form where indicated.

9. Pursuant to A.R.S. 36-333.03.E, by the tenth day of each month, the Clerk of the Court must submit all finalized Court Ordered Delayed Registrations for the preceding month. The Court Ordered Delayed Registrations shall be mailed to:

Office of Vital Records
P.O. Box 6018
Phoenix, Arizona 85005

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STATE OF ARIZONA
OFFICE OF VITAL RECORDS

COURT ORDERED DELAYED BIRTH REGISTRATION

FOR OFFICE USE ONLY
DATE RECEIVED BY STATE OFFICE

- Type the information entered on this form. Do NOT use cross-outs, write-overs, erasures, correction fluid, or correction tape. If a mistake is made, prepare a new form.
- If you have any questions regarding this form, call (602) 364-1300 or (602) 364-2429.

PART 1: BIRTH FACTS OF REGISTRANT

BIRTH FACTS OF REGISTRANT

NAME AT BIRTH: FIRST	MIDDLE	LAST (BEFORE MARRIAGE)	SUFFIX

SEX	RACE (SELECT FROM SECTION A AND ENTER IN THE SPACE BELOW)	DATE OF BIRTH: MONTH DAY YEAR

PLACE OF BIRTH: TOWN OR CITY	COUNTY	STATE
		ARIZONA

PART 2: INFORMATION ABOUT NATURAL PARENTS

NATURAL PARENTS OF REGISTRANT

FATHER'S NAME: FIRST	MIDDLE	LAST	SUFFIX

PLACE OF BIRTH (STATE OR COUNTRY)	DATE OF BIRTH	SOCIAL SECURITY NUMBER	RACE	IS THE FATHER OF HISPANIC ORIGIN? ☐ YES ☐ NO; If, YES WAS CHECKED, PLEASE SELECT ORIGIN FROM SECTION B AND ENTER HERE

MOTHER'S NAME: FIRST	MIDDLE	LAST NAME (BEFORE FIRST MARRIAGE)	CURRENT LEGAL LAST NAME

PLACE OF BIRTH (STATE OR COUNTRY)	DATE OF BIRTH	SOCIAL SECURITY NUMBER	RACE	IS THE MOTHER OF HISPANIC ORIGIN? ☐ YES ☐ NO; If, YES WAS CHECKED, PLEASE SELECT ORIGIN FROM SECTION B AND ENTER HERE

MOTHER'S RESIDENCE AT THE TIME OF BIRTH (STREET ADDRESS)	CITY / TOWN	STATE	COUNTY

WAS THE MOTHER'S RESIDENCE A TRIBAL COMMUNITY? ☐ YES ☐ NO IF YES, PLEASE SELECT THE TRIBAL COMMUNITY FROM SECTION C AND ENTER YOUR SELECTION HERE			

PART 3: DOCUMENTARY EVIDENCE AND INFORMATION

DOCUMENTARY EVIDENCE AND INFORMATION ACCEPTED BY THE COURT

DATE ESTABLISHED	TYPE OF DOCUMENT / EVIDENCE
DATE ESTABLISHED	TYPE OF DOCUMENT / EVIDENCE
DATE ESTABLISHED	TYPE OF DOCUMENT / EVIDENCE
DATE ESTABLISHED	TYPE OF DOCUMENT / EVIDENCE
OTHER INFORMATION	DESCRIBE:

SIGNATURE OF REGISTRANT/ OTHER (REGISTRANT MUST BE 18 YEARS OR OLDER TO SIGN OR AN EMANCIPATED MINOR)

BY SIGNING THIS DOCUMENT, YOU ARE VERIFYING THE INFORMATION PROVIDED ON THIS FORM IS TRUE AND ACCURATE.	PLACE A CHECK MARK NEXT TO THE APPROPRIATE SELECTION ☐ REGISTRANT ☐ OTHER	PRINT NAME	DATE SIGNED
		SIGNATURE	

PART 4: CERTIFICATION OF CLERK OF COURT

CERTIFICATION OF CLERK OF THE COURT

A FINAL ORDER TO ESTABLISH A DELAYED BIRTH CERTIFICATE WAS GRANTED IN THE SUPERIOR COURT OF THIS STATE ON

_____ 20 _____ IN CASE NO _____

JUDGE _____ PRESIDING

DATE SIGNED	BY	CLERK FOR COUNTY OF

CLERK OF COURT (IMPRESS COURT SEAL HERE)

UPON COMPLETION, MAIL THIS DOCUMENT TO:

THE OFFICE OF VITAL RECORDS
P.O. BOX 6018
PHOENIX, AZ 85005

STATE OF ARIZONA
OFFICE OF VITAL RECORDS

COURT ORDERED DELAYED BIRTH REGISTRATION FORM - REVERSE SIDE

	SECTION A - RACE	
White	Chinese	Native Hawaiian
Black or African American	Filipino	Guamanian or Chamorro
American Indian or Alaska Native	Japanese	Samoan
Asian	Korean	Other Pacific Islander - (specify)
Asian Indian	Vietnamese	Other - (specify)
	Other Asian - (specify)	
	SECTION B - HISPANIC ORIGIN	
Puerto Rican	Mexican, Mexican American, Chicano	Cuban
Other Spanish / Hispanic / Latino (specify)		
	SECTION C - TRIBAL COMMUNITY	
Ak-Chin Indian Community	Hualapai Tribe	San Carlos Apace Tribe
Cocopah Indian Tribe	Kaibab - Paiute Tribe	San Juan Southern Paiute Tribe
Colorado River Indian Tribe	Navajo Nation	Tohono O'Odham Tribe (Papago)
Fort McDowell Yavapai Nation	Pascua Yaqui Tribe	Tonto Apache Tribe
Fort Mojave Indian Tribe	Yavapai Apache Nation	White Mountain Apache Tribe
Gila River Indian Community	Yavapai - Prescott Indian Tribe	Other Non-Arizona Tribe (specify)
Havasupai Tribe	Quechan Tribe	
Hopi Tribe	Salt River Pima - Maricopa Indian Community	

(1) Person Filing: _____
Mailing Address: _____
City, State, Zip Code: _____
Day/Evening Phone: _____ / _____
Represented by ☐ SELF (No Attorney) OR ☐ Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

FOR CLERK'S USE ONLY

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

(2) In the Matter of

_____
(Name of person for whom birth certificate is requested)

Case No. _____

ORDER REGARDING PETITION TO ESTABLISH DELAYED BIRTH CERTIFICATE A.R.S. § 36-333

(3) THE COURT FINDS

☐ As required by A.R.S. § 36-333.02(E), the petitioner first applied to the Department of Vital Records for a delayed birth certificate, was rejected, and the "letter of denial" issued by that department was presented to this court.

☐ The evidence presented for the petitioner supports the creation and registration of a delayed birth certificate.

☐ The evidence presented for the petitioner does not sufficiently support the creation and registration of a delayed birth certificate.

(4) IT IS ORDERED

☐ **DENYING PETITION**

☐ **GRANTING PETITION and ordering the Office of Vital Records to issue a delayed birth registration for:**

(5) First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: **Month** _____ **Date** _____ **Year** _____

_____
Date

_____
Judicial Officer

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LAW LIBRARY RESOURCE CENTER

PROCEDURES: WHAT TO DO AFTER COMPLETING THE PAPERS TO REQUEST A COURT ORDER FOR A DELAYED BIRTH CERTIFICATE

WARNING!

DO NOT FILE THIS APPLICATION UNTIL OR UNLESS YOU HAVE *FIRST*:

a) applied for a delayed birth certificate to the Office of Vital Records,
b) *been rejected*, AND
c) received a *letter of denial*, which you must file *with this petition*.

Have you applied for a delayed birth certificate with the Office of Vital Records?

- If the answer is yes, did you receive a denial letter?
- If the answer is *"**No**":* YOU DO NOT QUALIFY TO RECEIVE A COURT ORDER FOR A DELAYED BIRTH CERTIFICATE FROM THE COURT.

Do not copy or file this page

STEP 1: **MAKE 2 COPIES OF THE:**

- ***"Petition for Order to Establish Delayed Birth Certificate".***
- All Other Required Documents, including**:**
  - **"LETTER OF DENIAL"** from Office of Vital Records - ***REQUIRED!***
  - All Documents originally submitted to Vital Records in support of your request.
  - Any additional supporting documents.

STEP 2: **GO TO THE CLERK OF COURT TO FILE YOUR PAPERS and pay your filing fee.**
The Court is open from 8:00 a.m.-5:00 p.m., Monday-Friday. You should go to the Court at least two hours before closing. You may file your court papers at the following Superior Court locations:

Central Court Building
201 West Jefferson, 1st floor
Phoenix, Arizona 85003

Southeast Court Facility
222 East Javelina Avenue, 1st floor
Mesa, Arizona 85210

Northwest Court Facility*
14264 West Tierra Buena Lane
Surprise, Arizona 85374

Northeast Regional Court Center
18380 North 40th Street
Phoenix, AZ 85032

* You may file here but your hearing will be set at a different location.

PAPERS: Give the original Civil Court Cover Sheet, the Petition, the **"**Letter of Denial" from Vital Records, *and all supporting documents* to the Clerk.

FEES: A list of current fees is available from the Law Library Resource Center and from the Clerk of Court's website.

If you cannot afford the filing fee and/or the fee for having the papers served by the Sheriff or by publication, you may request a deferral (payment plan) when you file your papers with the Clerk of the Court. Deferral Applications are available at no charge from the Law Library Resource Center.

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The filing clerk will stamp each set of papers and return the 2 stamped copies to you.

STEP 3: **Immediately take one set to Civil Court Administration** (ask "where" when you file).

- Keep one set for your records.

STEP 4: **WAIT FOR NOTICE OF WHEN YOUR HEARING WILL BE HELD:**

The court will set a date for a hearing on the petition and shall provide notice of the date, time and place of the hearing to you and to the State Registrar (Office of Vital Records) *at least* **twenty days** *before* the hearing. The State Registrar may appear and testify at the hearing. If you have not received a Notice of Hearing within 30 days after filing, you may contact Civil Court Administration at **602-506-1497** to inquire about the status of your hearing.

IMPORTANT: ***IF YOU MUST SERVE NOTICE ON ANY PARTY BY CERTIFIED MAIL OR BY PUBLICATION*** (as described in STEP 5, below), **NOTIFY CIVIL COURT ADMINISTRATION SO ENOUGH TIME IS ALLOWED FOR YOU TO MAIL NOTICE AT LEAST 30 DAYS BEFORE THE HEARING OR TO PUBLISH NOTICE ONCE A WEEK FOR FOUR (4) WEEKS BEFORE THE HEARING.**

STEP 5: **NOTIFY ANY INTERESTED PARTY**

WHO: If you are a parent, filing the ***"Petition to Establish a Delayed Birth Certificate"*** for your minor child, you must notify the other parent (and any legal guardian) of the minor child (or both parents if you are the child's guardian) about your request and the scheduled hearing.

If you are an adult filing for a delayed birth certificate for yourself, you must notify any living person whom you have listed as your parent on the "***Petition"***.

HOW TO NOTIFY:

1. If you know where the person to be notified lives, and that person agrees with the Petition and will cooperate, give him/her a stamped copy of your Petition and the ***"Notice of Hearing Regarding Delayed Birth Certificate"*** that shows the date, time, and place of your hearing. Then, have the parent (or Legal Guardian) complete the form entitled ***"Consent to Establishment of Delayed Birth Certificate and Waiver of Notice"*** and have it notarized. That document serves as your proof of notice. ***Bring it to the hearing.***

A Note about Response Times

If you serve an interested party notice by personal service or they agree to signing and notarizing an "Acceptance of Service," the party will have twenty (20) days after service to file a response. However, if you ask a party to sign and notarize a "Waiver of Notice" and they agree, the party is allowed more time to respond. The party has sixty (60) days to respond after the request for waiver was sent, or ninety (90) days after it was sent outside the United States. A.R.C.P. (12)(a)(1)(A). The "Affidavit of Service," "Acceptance of Service" or "Waiver of Notice" must be signed and filed with the court as proof.

2. **IF THE PARENT (or Legal Guardian) DOES NOT AGREE WITH YOUR REQUEST**, or at least *will not sign* the ***"Consent and Waiver of Notice"***, give him/her a stamped copy of your application and the ***"Notice of Hearing Regarding Delayed Birth Certificate"*** that shows the date, time, and place of your hearing. Then, have the person sign and have notarized an ***"Acceptance of Service"*** form **(**available through the Law Library Resource Center) that simply states he/she has received the paper(s) listed on the Acceptance form. That notarized form serves as the proof of notice. Bring the signed and notarized ***"Acceptance of Service"*** to the hearing; **OR,**

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3. Send a clerk-stamped copy of your application and the ***"Notice of Hearing Regarding Delayed Birth Certificate"*** showing the date, time, and place of hearing by certified mail/restricted delivery (return receipt requested). This must be done at least 30 days before the hearing.* Proof of Notice for this step is the card returned to you from the Post Office showing delivery. Bring the card and a completed ***"Affidavit of Service by Certified Mail"*** to the hearing. The person who should receive notice of the hearing must sign the return receipt.

4. **IF YOU DO NOT KNOW WHERE A PARENT LIVES: NOTICE BY PUBLICATION***

IF LAST KNOWN ADDRESS IN MARICOPA COUNTY *OR STATE OTHER THAN ARIZONA:* A Notice of Hearing (a legal notice classified advertisement) that shows the date, time, and place of your hearing must be published in a newspaper of general circulation in Maricopa County at least once a week for four (4) consecutive weeks before the hearing.

IF LAST KNOWN ADDRESS IN ARIZONA COUNTY *OTHER THAN* MARICOPA COUNTY: A Notice of Hearing (a legal notice classified advertisement) that shows the date, time, and place of your hearing must be published in a newspaper of general circulation in Maricopa County **and** in the Arizona county of last known address at least once a week for four (4) consecutive weeks before the hearing.

*** IMPORTANT: *IF YOU MUST SERVE NOTICE ON ANY PARTY BY CERTIFIED MAIL OR BY PUBLICATION*, NOTIFY CIVIL COURT ADMINISTRATION SO ENOUGH TIME IS ALLOWED FOR YOU TO MAIL NOTICE AT LEAST 30 DAYS BEFORE THE HEARING OR TO PUBLISH NOTICE ONCE A WEEK FOR FOUR (4) WEEKS BEFORE THE HEARING.**

AFTER publication has been completed, you must obtain and file an "***Affidavit of Publication"*** from the newspaper indicating publication was completed.

In addition to the Affidavit from the newspaper, you also must complete a ***"Declaration Supporting Publication"***, a notarized statement explaining in detail what efforts you made to locate the person(s). Bring that statement with you to the hearing. **The Court will not accept notification by publication unless diligent efforts have been made to locate the person for whom notification is required.** For more information regarding service by publication, please see the Law Library Resource Center packet on "***Service of Court Papers When You Cannot Find the Other Party***".

STEP 6: **ATTEND THE HEARING.** ***WHO SHOULD ATTEND THE HEARING:***

- An adult (over the age of 18 or emancipated) requesting his or her own delayed birth registration;
- A parent or legal guardian requesting the delayed birth registration on behalf of a person under the age of 18, or
- A legal guardian requesting the delayed birth registration on behalf of a disabled adult.

BRING THE ORIGINAL AND ONE COPY OF OF THE FOLLOWING TO THE HEARING:

- ANY ADDITIONAL SUPPORTING DOCUMENTS, AND
- "THE COURT ORDER".

BRING THE ORIGINAL AND TWO COPIES OF THE FOLLOWING TO THE HEARING:

- THE "COURT ORDERED DELAYED BIRTH REGISTRATION FORM."

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