

COMMONWEALTH OF VIRGINIA



DMV/VDH Vital Records Operations Manual September 2015

VIRGINIA DEPARTMENT OF HEALTH
DIVISION OF VITAL RECORDS
2001 Maywill Street
Richmond, VA 23222

CONTENTS

STAFF INTRODUCTION

FORWARD

CHAPTER 1 – CODE OF VIRGINIA

§32.1-249 (9) (10) – DEFINITIONS

§32.1-252 (A) (2) (3) (6) (C) – STATE REGISTRAR: DUTIES

§32.1-270 – STATE REGISTRAR MAY REPRODUCE RECORDS; DISPOSITION OF DOCUMENTS FROM WHICH PERMANENT REPRODUCTIONS MADE.

§32.1-271 (A) (D) (F) – DISCLOSURE OF INFORMATION IN RECORDS

§32.1-272 (A) (G) – CERTIFIED COPIES OF VITAL RECORDS; OTHER COPIES

§32.1-273 (A) (B) (C) – FEES FOR CERTIFIED COPIES

§32.1-276 – PENALTY IMPOSED FOR VIOLATIONS

CHAPTER 2 – VIRGINIA ADMINISTRATIVE CODE

12VAC5-550-5 – DEFINITIONS “IMMEDIATE FAMILY” “REGISTRANT”

12VAC5-550-470 – INDIVIDUAL REQUESTS

12VAC5-550-500 – APPLICATION FOR RECORDS

12VAC5-550-520 – FEES

CHAPTER 3 – AUDIT (FINANCIAL AND IT SECURITY)

REPORTS:

CERTIFICATIONS ISSUED

FEES COLLECTED

SYSTEM ACCESS FORM REPORT

VOID SECURITY PAPER REPORT

CHAPTER 4 – FORMS

SECURITY FORMS

APPLICATION FOR CERTIFICATION OF A VITAL RECORD

OTHER FORMS

CHAPTER 5 - SECURITY PAPER

VERIFICATION UPON RECEIPT OF SECURITY PAPER SHIPMENT

DISCREPANCY/INCIDENT REPORTING

REQUIRED LOGS

ACCOUNTING FOR USE OF SECURITY PAPER

STORAGE OF SECURITY PAPER

SECURITY PAPER USAGE

CHAPTER 6 – ISSUANCE and CERTIFICATIONS

VIRGINIA VITAL EVENTS AND SCREENING TRACKING SYSTEM (VVESTS)

APPLICATION FOR CERTIFICATION OF A VITAL RECORD

FORMS OF IDENTIFICATION

SEARCHING VVESTS

PRINTING CERTIFIED BIRTH, MARRIAGE, DIVORCE AND DEATH CERTIFICATES

CHAPTER 7 – RECORDS WITH ALERT MESSAGES

ATTACHMENTS

Staff

Virginia Department of Health

109 Governor Street
Richmond, VA 23219

Marissa J. Levine, MD MPH – State Health Commissioner

Richard Corrigan – Deputy Commissioner for Administration

Debbie Condrey – Director/CIO, Office of Information Management and Health IT

Division of Vital Records

2001 Maywill Street
Richmond, VA 23230
(804) 662-6200

Janet M. Rainey – Director and State Registrar

Michelle A. Reid – Assistant State Registrar

Charlene Taylor – Operations Manager

Cora Robertson – Fiscal Technician

FORWARD

This operations manual is designed to assist the Department of Motor Vehicles staff engaged in the issuance of birth certifications from the Virginia Vital Event and Screening Tracking (VVESTS) system. The procedures recommended are based on the Code of Virginia and the Virginia Administrative Code.

Janet M. Rainey
Director and State Registrar
Division of Vital Records
September 21, 2015

CHAPTER 1 – CODE OF VIRGINIA

The Code of Virginia provides the Commissioner the authority to appoint a State Registrar of Vital Records, and prescribes the State Registrar's duties. The State Registrar, the Division of Vital Records (DVR) and DVR's regulations must conform to the authority provided within the Code. During the 2013 Session of the General Assembly SB 1039 was introduced and enacted as Chapter 534 of the Virginia Acts of the Assembly, which amended and reenacted §§ 32.1-252, 32.1-270, 32.1-272, 32.1-273, and 32.1-276 of the Code of Virginia allowing the Department of Motor Vehicles (DMV) to issue certified copies of vital records. The objective of this chapter is to provide an understanding of the sections of the Code of Virginia which apply to the Department of Motor Vehicles in the issuance of certified copies of vital records.

§ 32.1-249. Definitions.

9. "System of vital records" means the registration, collection, preservation, amendment, and certification of vital records; the collection of other reports required by this chapter; and related activities.

10. "Vital records" means certificates or reports of births, deaths, fetal deaths, adoptions, marriages, divorces or annulments and amendment data related thereto.

§ 32.1-252. State Registrar; duties.

A. The State Registrar, under the supervision of the Commissioner, shall:

2. Direct and supervise the system of vital records and be custodian of its records.

3. Direct, supervise and control the activities of all persons when pertaining to the operation of the system of vital records.

6. Conduct training programs to promote uniformity of policy and procedures throughout the Commonwealth in matters pertaining to the system of vital records.

C. The Department of Motor Vehicles, when issuing a certified copy of a vital record, shall be subject to the State Registrar's rules, regulations, and audit requirements, including the provisions of this chapter.

§ 32.1-270. State Registrar may reproduce records; disposition of documents from which permanent reproductions made.

To preserve original documents, the State Registrar is authorized to prepare typewritten, photographic, electronic, or other reproductions of original vital records in his custody. Such reproductions when certified by him shall be accepted as the original records.

The documents from which permanent reproductions have been made and verified may be disposed of as provided by regulation.

Any vital record issued by the Department of Motor Vehicles shall be on security paper provided by the State Registrar and shall be considered a certified vital record and accepted as the original record.

§ 32.1-271. Disclosure of information in records; when unlawful; when permitted; proceeding to compel disclosure; when certain records made public.

A. To protect the integrity of vital records and to ensure the efficient and proper administration of the system of vital records, it shall be unlawful, notwithstanding the provisions of §§ 2.2-3700 through 2.2-3714, for any person to permit inspection of or to disclose information contained in vital records or to copy or issue a copy of all or part of any such vital records except as

authorized by this section or regulation of the Board or when so ordered by a court of the Commonwealth.

D. When 100 years have elapsed after the date of birth, or 25 years have elapsed after the date of death, marriage, divorce, or annulment the records of these events in the custody of the State Registrar shall, unless precluded from release by statute or court order, or at law-enforcement request, become public information and be made available in accordance with regulations that shall provide for the continued safekeeping of the records. All records that are public information on July 1, 1983, shall continue to be public information. Original records in the custody of the State Registrar that become public information shall be turned over to the Library of Virginia for safekeeping and for public access consistent with other state archival records, subject to the State Registrar and the Library of Virginia entering into a memorandum of understanding to arrange for continued prompt access by the State Registrar to original records for purposes of amendments to those records or other working purposes. The State Registrar's office may retain copies thereof for its own administrative and disclosure purposes.

F. The State Registrar or the city or county registrar shall issue a certified copy of a death certificate to the grandchild or great-grandchild of a decedent in accordance with procedures prescribed by the Board in regulation.

§ 32.1-272. Certified copies of vital records; other copies.

A. In accordance with § 32.1-271 and the regulations adopted pursuant thereto, the State Registrar or a district health department shall, upon receipt of a written request, issue a certified copy of any vital record in the custody of the State Registrar or of a part thereof.

The Commissioner of the Department of Motor Vehicles shall be authorized to issue a certified copy of a birth, death, marriage, or divorce vital record, or a part thereof, in the custody of the State Registrar.

Such vital records in the State Registrar's custody may be in the form of originals, photoprocessed reproductions or data filed by electronic means.

Each copy issued shall show the date of registration. Any copy issued from a record marked "delayed" or "amended," except a record amended pursuant to subsection F of this section or subsection D of § 32.1-269, shall be similarly marked and show the effective date.

Certified copies may be issued by county and city registrars only while the original record is in their possession, except that at the option of the county or city registrar true and complete copies of death certificates may be retained and certified copies of such records may be issued by the county or city registrar.

G. With the increased fees to be charged for vital records and the additional deposits to the Vital Statistics Automation Fund, the Board of Health shall establish, within the district health departments, a statewide system for decentralizing certification of vital records, when such records are prepared or issued from data in the custody of the State Registrar and the Board of

Health. Such system shall include the Department of Motor Vehicles pursuant to the authorization in subsection A.

§ 32.1-273. Fees for certified copies, searches of files, etc.; disposition.

A. The Board shall prescribe the fee, not to exceed \$12, **for a certified copy of a vital record or for a search of the files or records when no copy is made** and may establish a reasonable fee schedule related to its cost for information or other data provided for research, statistical or administrative purposes. Whenever any veteran or his survivor requires a certified copy of a vital record to obtain service-connected benefits, one copy of such record shall be provided directly to the U.S. Department of Veterans Affairs upon their request and one copy shall be provided to the veteran or his surviving spouse, upon request. No charge shall be imposed upon a veteran or his survivor for a copy related to obtaining service-connected benefits.

B. Fees collected under this section by the State Registrar shall be transmitted to the Comptroller for deposit. Two dollars of each fee collected by the State Registrar shall be deposited by the Comptroller into the Vital Statistics Automation Fund established pursuant to § 32.1-273.1 for so long as shall be authorized. Ten dollars of each fee shall be credited to a special fund to be appropriated by the General Assembly, as it deems necessary, for the purpose of carrying out the provisions of this chapter. When the Vital Statistics Automation System is completed, no further deposits into the fund shall be made and all fees collected under this section not credited to the special fund created by this subsection shall be deposited into the general fund of the state treasury.

C. The Department of Motor Vehicles shall collect a fee of \$12 for each certified copy of a vital record that it issues and shall transmit all such fees to the State Registrar on a monthly basis to ensure that the State Registrar recovers all costs associated with the issuance of certified copies of vital records at Department of Motor Vehicles facilities. In addition, for each certified copy of a vital record that it issues, the Department of Motor Vehicles shall collect a processing fee of \$2 as provided in § 46.2-205.2.

§ 32.1-276. Penalty imposed for violations.

Any person who commits any of the following acts is guilty of a Class 4 felony:

1. Who willfully and knowingly makes any false statement in a report, record, or certificate required to be filed under this chapter, or in an application for an amendment, certification or verification of any such report, record or certificate, or who willfully and knowingly supplies false information intending that such information be used in the preparation of any such report, record, or certificate, or amendment thereof; or
2. Who without lawful authority and with the intent to deceive, makes, counterfeits, alters, amends, or mutilates any report, record, or certificate required to be filed under this chapter or a certified copy of such report, record, or certificate; or
3. [Repealed.]

4. Who willfully and knowingly obtains, possesses, uses, sells, furnishes or attempts to obtain, possess, use, sell, or furnish to another, for any purpose of deception, any certificate, record or report required by this chapter or certified copy thereof made, counterfeited, altered, amended, or mutilated or which is false in whole or part or which relates to the birth of another person whether living or deceased without lawful authority; or

5. [Repealed.]

6. Who is an employee of the State Registrar or of, the Department of Health, or the Department of Motor Vehicles while engaged in activities pertaining to the operation of the system of vital records who, without lawful authority, willfully and knowingly furnishes or possesses any certificate, report, record, or certification thereof, with the knowledge or intention that it be used for the purposes of deception; or

7. Who, without lawful authority, possesses any certificate, record, or report required by this chapter or a copy or certification of such certificate, record, or report knowing same to have been stolen or otherwise unlawfully obtained.

CHAPTER 2 – VIRGINIA ADMINISTRATIVE CODE

The Division of Vital Records (DVR) regulations within the Virginia Administrative Code carry out the authority prescribed to the State Registrar of Vital Records within the Code of Virginia and provide programmatic structure. The Department of Motor Vehicles (DMV) must conform to all DVR regulations in order to issue certified copies of vital records. The objective of this chapter is to provide an understanding of the chapters of the Virginia Administrative Code which apply to the DMV in the issuance of certified copies of vital records. The regulations are currently undergoing an update via regulatory action.

CHAPTER 550
BOARD OF HEALTH REGULATIONS GOVERNING VITAL RECORDS

12VAC5-550-5. Definitions.

In addition to the words and terms defined in § 32.1-249 of the Code of Virginia, the following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise:

"Board" means the State Board of Health.

"Commissioner" means the State Health Commissioner.

"Department" means Virginia Department of Health.

"Immediate family" means a registrant mother, father (name must be shown on the certification), sibling, current spouse and adult children.

"Informant" means person providing information to complete the filing of a vital record in order to document a vital event.

"Midwife" means a registered nurse who has met the additional requirements of education and examination for licensure as a nurse practitioner in the Commonwealth.

"Primary evidence" means valid first-hand documentation established before the registrant's 18th birthday, such as school admission records, physician's records, immunization records, passport, federal census abstracts, baptismal records and insurance applications.

"Registrant" means the person whose personal information is registered and filed in the systems of vital records.

"Secondary evidence" means valid documentation established after the registrant's eighteenth birthday such as marriage records, child's birth certificate, school records, social security records, driver's records, work permit and employment records. Such evidence must be at least five years old.

12VAC5-550-470. Individual requests.

A. Upon request, the State Registrar or the city or county registrar shall disclose data or issue certified copies of birth or death records or information when satisfied that the applicant therefor **has a direct and tangible interest in the content of the record and that the information contained therein is necessary for the determination or protection of personal or property rights.**

B. A direct and tangible interest may be evidenced by requests from the registrant, members of his immediate family, his guardian, or their respective legal representatives in

the case of birth records. Such direct and tangible interest may be evidenced by requests from surviving relatives or their legal representatives in the case of death records.

C. For the purposes of securing information or obtaining certified copies of birth records, the term "legal representative" shall include a registrant's attorney; a person with power of attorney for affairs of registrant; an attending physician; or a federal, state or local governmental agency acting in behalf of the registrant or his family.

D. For the purposes of obtaining information of certified copies of death certificates, the term "legal representative" shall include the registrant's funeral service licensee; attorney; person with power of attorney for the affairs of the registrant; insurance company insuring the registrant; a federal, state or local governmental agency acting in behalf of the registrant or his family; a court appointed guardian; or a court appointed administrator.

E. A direct and tangible interest shall not be evidenced by the biological parents of an adopted child; nor by commercial firms, agencies, nonprofit or religious organizations requesting listings of names or addresses.

12VAC5-550-500. Application for records.

The State Registrar or the city or county registrar may require written applications for data; the identification of an applicant; or a sworn statement, when it shall seem necessary to establish an applicant's right to information from vital records.

12VAC5-550-520. Fees.

A. The fee to be charged by the State Registrar or by the city or county registrar shall be \$10 for each full certification or short form certification of a vital record, or for a search of the files or records when no copy is made. *(This Regulation is being amended to show the correct fee of \$12.00).*

B. When documents are amended or delayed birth registration is requested, the requester shall be charged an administrative fee of \$10.

CHAPTER 3 – AUDIT (FINANCIAL AND IT SECURITY)

The Division of Vital Records (DVR) has several audit requirements both financial and in terms of IT security in order to ensure compliance with both the Code of Virginia and Regulations Governing Vital Records. The Department of Motor Vehicles (DMV) must conform to these audit requirements in order to issue certified copies of vital records. The objective of this chapter is to provide an understanding of the audit requirements which apply to the DMV in the issuance of certified copies of vital records.

FINANCIAL AUDITS

DMV offices shall maintain a daily reconciliation of certificates issued and fees received. Fees shall be received for the issuance of certificates and the processing of vital record applications whether or not a certificate is issued. Monthly reconciliation reports shall be forwarded to the State Registrar or her designee. DVR shall balance these reports against the security paper issued.

All fees collected from customers for services received at a DMV office become the responsibility of DMV. DVR shall receive payment for all requests as well as all certificates issued based upon applications received and processed, whether or not a certified certificate is issued. In accordance to the Code of Virginia, the \$12.00 fee is for the search of our records whether or not a certificate is produced. Payment of fees to DVR shall be outlined in the MOA between DMV and DVR.

REFUNDS

All customer refunds for fees collected at a DMV office shall be sole responsibility of DMV. The standard DMV returned check fee will apply.

RETURN FEES (BAD CHECKS)

The collection of fees for any returned checks, money orders or rejected credit/debit shall be the sole responsibility of DMV.

SECURITY PAPER VOIDS

Voided security paper shall be accounted for daily. This may be done manually or electronically. DMV must maintain a copy of the Void Security Paper Report and send a monthly report to the State Registrar or her designee. The report must include but not limit to the audit control number. Reason for void security paper will be covered in Chapter 6.

IT AUDIT POINTS

STATE IT POLICIES:

DMV offices shall ensure that system access to the VVESTS system follow all VITA and VDH security guidelines for system access. No user shall be given access to the DVR system without the completion of all applicable security forms. All system users shall be made fully aware of the penalty for violating any security policies that breach the confidentiality of Vital Records.

USERS:

DMV must provide DVR with a monthly report of all active users. User accounts with no system activity for 90 days or more should be deactivated, in accordance with current COV policy. DMV shall immediately terminate user access when the employment ends.

SYSTEM AUDITING

DVR reserves the right to periodically review any system generated audit reports which show the activity of a user.

APPLICATION AUDIT

DVR reserves the right to audit any applications accepted for processing at a DMV office. Applications collected at DMV CSC shall remain on file electronically in the document imaging system for a period of 10 years in compliance with state retention guidelines. DVR must be notified prior to the physical destruction or electronic purging of any such files.

CHAPTER 4 – FORMS

In the day to day operation of the Division of Vital Records (DVR) different forms or letters are used. The forms can range from the Application for Certification of a Vital Record to the security form a user must sign to access information within the vital record system. The forms and letters within this Chapter will be used by DMV employees.

SECURITY FORMS

Each user must sign security forms, either electronically or in paper format, to access information within the vital record system. Forms comparable to the following forms must be signed by the Customer Service Representative (CSR) issuing certified birth, marriage, divorce or death certificates. These forms address confidentiality and information security policies.

A module will be added to classroom and e-learning Vital Records training. This module will serve as acknowledgement of their agreement to adhere to the policies set forth by the Division of Vital Records.

Commonwealth of Virginia
Department of Health

Information Systems Security Access Agreement

As a user of the Department of Health (VDH) Virginia Vital Events and Screening Tracking System (VVESTS), I understand and agree to abide by the VDH VVESTS Security Policy and the following terms which govern my access to and use of the information and computer services of VDH.

Access has been granted to me by VDH as a necessary privilege in order to perform my authorized job functions as for VDH. Passwords and logon IDs should not be shared. I am prohibited from using or knowingly permitting use of any assigned or entrusted access control mechanisms (such as Logon IDs, passwords, terminal IDs or file protection) for any purposes other than those required to perform my authorized employment functions. I agree to change passwords immediately if they are compromised. I will not incorporate passwords into any signon software.

If, due to my authorized job functions, I require access to information on VDH information systems which is not owned by my organization, I must obtain authorized access to that information from the information owner and present access documentation to the VDH Office of Information Management.

I will not disclose any confidential, restricted or sensitive data to unauthorized persons. I will not disclose information concerning any access control mechanism of which I have knowledge unless properly authorized to do so, and I will not use access mechanisms which have not been expressly assigned to me. I will not use VDH systems for commercial or partisan political purposes, such as using electronic mail to circulate advertising for products or for political candidates or issues.

If I observe incidents of non-compliance with the terms of this agreement, I am responsible for reporting them to my organization's contact person for the VDH VVESTS.

I give consent to the monitoring of my activities on the VDH VVESTS application. I agree to only try to connect to Virginia Vital Events and Screening Tracking System (VVESTS) through a secure connection.

By signing this agreement, I hereby certify that I understand the preceding terms and provisions and that I accept the responsibility of adhering to same. I further acknowledge that any infractions of this agreement may result in disciplinary action including but not limited to the termination of my access privileges.

System User/Consultant Name (Print)

Date of Signature

System User/Consultant Signature

Organization Name

VDH Virginia Vital Events and Screening Tracking System (VVESTS) Security Agreement Form

VDH - Division of Vital Records (DVR)

Information Security Policy

I have been informed of the Information Security Policy and agree to adhere to its provisions as related to my position, which include, but may not be limited to the following.

- I will not create, access, alter, delete, or release any vital records except as necessary to perform assigned duties.
- I will protect confidential and personal information, whether on paper, microfilm, or computer files by following security procedures as assigned by my work area.
- I will not disclose customer information except when necessary, according to the *Code of Virginia* and the Regulations Governing Vital Records and operating procedures.
- I will follow all identification procedures and requirements before conducting transactions on an individual's records or do anything that may affect an individual's birth, death, marriage, or divorce status.
- I will only disclose confidential or personal information to another DVR or DMV employee, if that employee has an official need to know in connection with his or her job duties.
- No vital records, certified certificates or certified paper are to be taken from the premises, without proper authorization.
- I will immediately report any knowledge of a violation of this policy to my supervisor.
- I will protect information obtained from other agencies (federal, state, local government and other reporting sources) from disclosure to unauthorized parties.
- I will complete an application and pay appropriate fees for vital records or any other service of DVR.

I understand my failure to comply with this policy may result in disciplinary action and/or termination. I also understand that I may incur civil penalties and/or criminal prosecution as noted in the Virginia Computer Crimes Act of 1987 and applicable state and federal laws.

Employee Signature _____ Date _____

Employee Name (Print) _____

Commonwealth of Virginia

Virginia Information Technologies Agency

Information Security Access Agreement

As a user of the State's central computer systems which are operated by the Virginia Information Technologies Agency (VITA), I understand and agree to abide by the following terms which govern my access to and use of the processing services of VITA:

Access has been granted to me by VITA as a necessary privilege in order to perform authorized job functions for the agency by which I am currently employed. I am prohibited from using or knowingly permitting use of any assigned or entrusted access control mechanisms (such as log-in IDs, passwords, terminal IDs, user IDs, file protection keys or production read/write keys) for any purpose other than those required to perform my authorized employment functions;

If, due to my authorized job functions, I require access to information on VITA's computer systems which is not owned by my agency, I must obtain authorized access to that information from the owning agency and present it to VITA;

I will not disclose information concerning any access control mechanism of which I have knowledge unless properly authorized to do so by my employing agency, and I will not use any access mechanism which has not been expressly assigned to me;

I agree to abide by all applicable Commonwealth of Virginia, VITA, and employing agency policies, procedures and standards which relate to the security of VITA computer systems and the data contained therein;

If I observe any incidents of non-compliance with the terms of this agreement, I am responsible for reporting them to the information security officer and management of my employing agency as well as the VITA Office of Security;

By signing this agreement, I hereby certify that I understand the preceding terms and provisions and that I accept the responsibility of adhering to the same. I further acknowledge that any infractions of this agreement will result in disciplinary action, including but not limited to the termination of my access privileges

Employee/Consultant Name (Print)

Date

Employee/Consultant Signature

Virginia Information Technologies Agency
Agency Name

Division Name

APPLICATION FOR CERTIFICATION OF A VITAL RECORD

The following vital record applications should be completed by the person requesting a certified vital record. These applications are only for events (births, deaths, marriages and divorces) that occurred in the Commonwealth of Virginia. It is important that the CSR review the relevant application with the requester to determine that they are entitled to the vital record and have provided sufficient information before accepting the application for processing.



BORN IN VIRGINIA VIRGINIA BIRTH CERTIFICATE APPLICATION

DL 81 (09/25/2014)

Purpose: Customers born in Virginia (from 1912 to the present) use this form to request a Virginia birth certificate in person.
Instructions: The requester - the person submitting this application - must show an acceptable identification document(s) from the list on the back of this form and provide payment to the Department of Motor Vehicles (DMV). Submit to any DMV Customer Service Center.

NOTE: Fees paid for a birth certificate/vital records search are non-refundable. Virginia statutes require DMV to charge a fee of \$14.00 (which includes a \$2.00 administrative fee) for each search regardless of whether a certification of a vital record is completed or not found. If paying by check, make check payable to the Department of Motor Vehicles (DMV). There is an \$85.00 service charge for returned checks. Requests that cannot be completed by DMV will be forwarded to the Virginia Department of Health/Division of Vital Records. The State Registrar of Vital Records reserves the right to accept or deny any application (Virginia Code §32.1-271 (C)).

REQUESTER INFORMATION			
REQUESTER NAME (print) - (last)		(first)	(middle) (suffix)
REQUESTER ADDRESS		CITY	STATE ZIP CODE
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	REQUESTER EMAIL		TELEPHONE NUMBER ()
RELATIONSHIP OF REQUESTER TO PERSON NAMED ON THE CERTIFICATE (check one)			
<input type="checkbox"/> SELF <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> CHILD <input type="checkbox"/> SISTER <input type="checkbox"/> BROTHER <input type="checkbox"/> CURRENT SPOUSE <input type="checkbox"/> MATERNAL GRANDPARENT <input type="checkbox"/> PATERNAL GRANDPARENT <input type="checkbox"/> LEGAL GUARDIAN -(must show court approved custody papers) <input type="checkbox"/> LEGAL REPRESENTATIVE (additional documents - Bar Card/Power of Attorney required) <input type="checkbox"/> NON RELATIVE (Public Record Request only) <input type="checkbox"/> NON-IMMEDIATE FAMILY (Public Record Request only)			
REASON FOR REQUESTING			
<input type="checkbox"/> RETIREMENT <input type="checkbox"/> SCHOOL: Pre-K to 12 <input type="checkbox"/> TRAVEL <input type="checkbox"/> PASSPORT <input type="checkbox"/> EMPLOYMENT <input type="checkbox"/> HOUSING <input type="checkbox"/> INSURANCE <input type="checkbox"/> DMV LICENSE OR ID CARD <input type="checkbox"/> VETERANS BENEFITS ONLY <input type="checkbox"/> OTHER (specify) _____ <input type="checkbox"/> PUBLIC RECORD REQUEST - (records at least 100 years old)			

BIRTH CERTIFICATE INFORMATION			
NUMBER OF COPIES	NAME AT BIRTH (print) - (last)		(first) (middle) (suffix)
If name has changed since birth due to adoption, court order or any reason other than marriage, enter the changed name here.	BIRTH NAME CHANGED TO: (print) (last) (first) (middle) (suffix)		
	BIRTH DATE (mm/dd/yyyy)	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTH PLACE (Virginia city or county)
MOTHER FULL MAIDEN NAME (print mother's name before first marriage/name at time of mother's birth) (print) - (last)		(first)	(middle) (suffix)
FATHER FULL NAME (if known) (print) - (last)		(first)	(middle) (suffix)

CERTIFICATION	
I understand that making a false application for a Vital Record is a Felony under state and federal law. I also certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.	
REQUESTER SIGNATURE	DATE (mm/dd/yyyy)

DMV USE ONLY			
ID Documents Requester Presented (must be 1 primary or 2 secondary documents from the list on the back)			DMV CUSTOMER NUMBER
	Primary 1 or Secondary 1	Secondary 2	CSR STAMP
Type of Identification			
Expiration Date			
Document Number			
CSR Signature			



MARRIAGE - DIVORCE - DEATH CERTIFICATE VIRGINIA VITAL RECORD APPLICATION

DL 82 (08-17-2015)

Purpose: Customers use this form to request a Virginia death, marriage or divorce certificate in person.

Instructions: The requester - the person submitting this application - must show an acceptable identification document(s) from the list on the back of this form and provide payment to the Department of Motor Vehicles (DMV). Submit to any DMV Customer Service Center.

NOTE: Fees paid for a vital records search/document are non-refundable. Virginia statutes require a fee of \$14.00 (which includes a \$2.00 administration fee) for each search regardless of whether a certification of a vital record is completed or not found. If paying by check or money order, make payable to the Department of Motor Vehicles (DMV). There is an \$85.00 service charge for returned checks. The State Registrar of Vital Records reserves the right to accept or deny any application (Virginia Code §32.1-271 (C)).

REQUESTER/VITAL RECORD INFORMATION			
REQUESTER NAME (person requesting certification) (print) - (last) (first) (middle) (suffix)			
REQUESTER ADDRESS		CITY	STATE ZIP CODE
GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	REQUESTER EMAIL	TELEPHONE NUMBER	
RELATIONSHIP OF REQUESTER TO PERSON NAMED ON THE CERTIFICATE (check one)			
<input type="checkbox"/> SELF <input type="checkbox"/> MOTHER <input type="checkbox"/> FATHER <input type="checkbox"/> CHILD <input type="checkbox"/> SISTER <input type="checkbox"/> BROTHER <input type="checkbox"/> CURRENT SPOUSE <input type="checkbox"/> GRANDCHILD (death certificate only) <input type="checkbox"/> GREAT GRANDCHILD (death certificate only) <input type="checkbox"/> LEGAL REPRESENTATIVE (Bar Card/Power of Attorney required) <input type="checkbox"/> EXECUTOR (approved papers required) <input type="checkbox"/> NON RELATIVE (Public Record Request only) <input type="checkbox"/> NON IMMEDIATE FAMILY (Public Record Request only) <input type="checkbox"/> LEGAL GUARDIAN (approved papers required) <input type="checkbox"/> FUNERAL DIRECTOR (death certificate only) (enter license number)			
REASON FOR REQUESTING			
<input type="checkbox"/> LIFE INSURANCE PURPOSES <input type="checkbox"/> ESTATE SETTLEMENTS <input type="checkbox"/> TO CLOSE AN ACCOUNT (Bank/Utilities) <input type="checkbox"/> TRANSFER PROPERTY (Car/Real Estate) <input type="checkbox"/> MEDICAL REASONS (Medical History) <input type="checkbox"/> SOCIAL SECURITY BENEFITS <input type="checkbox"/> PASSPORT <input type="checkbox"/> NAME CHANGE (marriage certificate only) <input type="checkbox"/> PUBLIC RECORD REQUEST (Records at least 25 years old) <input type="checkbox"/> VETERANS BENEFITS ONLY <input type="checkbox"/> OTHER (explain)			

CERTIFICATION/DOCUMENT REQUESTED			
<input type="checkbox"/> MARRIAGE CERTIFICATE <input type="checkbox"/> DIVORCE CERTIFICATE			NUMBER OF PAPER COPIES REQUESTED _____
check one: <input type="checkbox"/> GROOM <input type="checkbox"/> BRIDE <input type="checkbox"/> SPOUSE PRINT FULL NAME (first, middle, last, suffix)		MAIDEN NAME	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
check one: <input type="checkbox"/> GROOM <input type="checkbox"/> BRIDE <input type="checkbox"/> SPOUSE PRINT FULL NAME (first, middle, last, suffix)		MAIDEN NAME	GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
MARRIAGE DATE (mm/dd/yyyy)	MARRIAGE LOCATION (Virginia city or county)	PLACE WHERE LICENSE WAS ISSUED	
DIVORCE DATE (mm/dd/yyyy)	DIVORCE LOCATION (Virginia city or county)		
<input type="checkbox"/> DEATH CERTIFICATE	NUMBER OF PAPER COPIES REQUESTED _____	RACE OF DECEASED _____	DATE OF DEATH (mm/dd/yyyy) AGE AT DEATH YEARS: _____ OR <input type="checkbox"/> LESS THAN ONE YEAR
DECEASED NAME (print) - (first) (middle) (last) (suffix)			GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DEATH LOCATION (Virginia city or county)		HOSPITAL NAME (if appropriate)	
check one: <input type="checkbox"/> PARENT <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER PRINT FULL NAME (first, middle, last, suffix)		GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MAIDEN NAME
check one: <input type="checkbox"/> PARENT <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER PRINT FULL NAME (first, middle, last, suffix)		GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MAIDEN NAME

CERTIFICATION		
I understand that making a false application for a vital record is a felony under state and federal law. I also certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.		
REQUESTER SIGNATURE	FUNERAL DIRECTOR AND REPRESENTATIVE SIGNATURE (if applicable)	DATE (mm/dd/yyyy)

DMV USE ONLY		
ID Documents Requester Presented (must be 1 primary or 2 secondary documents from the list on the back)		CSR STAMP
	PRIMARY 1 or SECONDARY 1	
	SECONDARY 2	
Type of Identification		
Expiration Date		
Document Number		
CSR SIGNATURE		

OTHER FORMS

To address the issue of discrepancies on any certificate, customers should be referred to the Division of Vital Records. The back of the certificate explains the steps that must be followed by the customer. If a customer inquires about the lack of a raised seal on the security paper, the following form should be issued to the requester.

THIS STATEMENT IS ISSUED TO THE REQUESTER THAT QUESTIONS WHY THE SECURITY PAPER DOES NOT HAVE A RAISED SEAL. Applies to all vital record certificates

VIRGINIA DIVISION OF VITAL RECORDS CERTIFICATION PAPER

Effective February 1, 2001, The Division of Vital Records made changes to its certification paper. Under Virginia law (§32.1-272 of the Code of Virginia and §13.1.3 of the Rules and Regulations Governing Vital Records), The State Registrar has met the requirements for the issuance of vital records. Statute only requires that the seal of the issuing office be impressed (not raised) on the certification. The new certification paper provides a more cost effective and efficient manner to process vital record requests.

Before issuing the new certification paper to the public, samples of the new certification paper were sent to passport offices across the country as well as other state, federal and local agencies. If you encounter any agency that questions this certification paper, please direct them to this office. The telephone number is (804) 662-6200.

**Janet M. Rainey
Director and State Registrar**

CHAPTER 5 - SECURITY PAPER

All certified copies of a vital record shall be issued on security paper with the exception of copies issued for veteran's services, which will be printed on plain acid-free paper. Two different types of security paper (VS15B and VS15C) will be provided for birth, marriage, divorce and death certificates. The VS15C will only be used for death certificates issued after November 1, 2015. This security paper is obtained through the Division of Vital Records (DVR) and there are strict guidelines as to how the receipt of security paper should be handled in the Department of Motor Vehicle (DMV). The Director and State Registrar or designee at the DVR shall provide the DMV the required security paper, according to the arrangement made between the two offices. The Director and State Registrar or designee shall monitor security paper issuance and DMV accountability. All procedures outlined within this section apply to both types of security paper being utilized.

There are two ways a certificate can be produced. A certificate can be made by a DVR or DMV employee or by a document forger (who may be one and the same). In either case, if the forged certificate is created using the security paper of the issuing agency the apparent authenticity and the value of the forgery are markedly higher. This opportunity could lead to the possible creation of a black market for security paper. This condition could then lead DVR or DMV employees who have access to that paper to be tempted or coerced into stealing it for personal gain. The purpose of this chapter is to outline the guidelines regarding the receipt, handling and inventory of security paper in order to ensure the integrity of vital records from the Commonwealth.

VERIFICATION UPON WAREHOUSE RECEIPT OF SECURITY PAPER SHIPMENT

Any individual receiving security paper shall be designated in writing to do so. To ensure all security paper is accounted for, it is imperative the individual receiving the security paper verifies the paper immediately upon receipt. If the individual designated to receive the security paper does not comply with requirements stated, incidents of noncompliance with these important procedures shall be reported immediately (via email) to the State Registrar or her designee.

The following steps **shall** be followed:

1. Upon initial receipt of the security paper, open the boxes and verify the control numbers on the boxes match the control numbers on the cards within the sealed ream of security paper.
2. Any discrepancies must be reported immediately to the State Registrar or her designee.
3. Complete the Receipt for Security Paper form. (Attachment A)
4. Place all security paper in a secured storage area, with limited access, immediately upon verification of shipment.
5. Security paper must be stored in such a manner as to allow for use in sequential order of the control numbers.

SECURITY PAPER RECEIPT IN THE CSC

Individual CSCs will receive their supply of security paper from the DMV Warehouse. Upon receipt of a shipment of security paper, the CSC manager or designate will verify the shipment is correct and will match the serial numbers written on the outside of the pack to the enclosed ASA-50. The ASA-50 will then be completed, signed, and faxed to Vault Consignment. Secure paper will be stored in a locked security closet until it is loaded into a printer drawer.

DISCREPANCY/INCIDENT REPORTING

If discrepancies are noted *after* the security paper has been received, the DMV staff responsible for receiving the security paper shall notify the State Registrar or her designee ***immediately***. Discrepancies shall be noted on the Security Paper Incident Report form (Attachment B) and forwarded to the State Registrar or her designee.

1. Reporting procedures upon opening the security paper:
 - a. Any discrepancy in the security paper shall be immediately reported to the State Registrar or her designee.
 - b. The Security Paper Incident Report form shall be completed detailing the facts.
 - c. A copy of the report shall be sent to the State Registrar or her designee
2. The following are reportable incidents:
 - a. Any missing control numbers noted when certifying the receipt of the security paper.
 - b. Any sheets of security paper that have been damaged.

- c. Audit control numbers on the individual packets that are not in sequential order.
- d. Other suspected discrepancies/incidents.

Any security paper deemed unusable/damaged will be marked as “VOID”, scanned into DMV’s document imaging system and destroyed by the CSC.

STORAGE OF SECURITY PAPER

Security paper is a very valuable document and shall be protected at all times. The procedures listed below shall be followed to safeguard the security paper.

1. Security paper shall be stored within the office and not left sitting in hallways, on the floor, or other areas that are not secure;
2. Security paper shall be stored in a secured area (i.e. locked room, or safe); at 68-76 degrees Fahrenheit and relative humidity of 35-55% (see page 45);
3. Security paper shall not be left in view of clients or other passersby;
4. Security paper shall be used in the order in which it was received; storage must be arranged so that it is issued in numerical sequence;
5. Security Paper shall be removed from printer each night unless both (security paper and printer) are in a locked closet or other secure storage unit. It is not sufficient that the office is locked each evening. An additional level of security is necessary;
6. Opened paper intended for daily use must be secure at all times during the workday;
7. Remember, security paper is valuable. It *must* be safeguarded at all times and access shall be limited only to authorized individuals.

SECURITY PAPER MONTHLY INVENTORY SUMMARY REPORT

DMV will provide a monthly inventory summary report to DVR. This report will contain the following information:

1. All security paper stored within DMV headquarters and the local DMV offices;
2. The range of audit control number issued to a DMV office;
3. The name and title of the person who received the security paper at the DMV warehouse;
4. The date the inventory was completed.

The inventory report shall be sent on a monthly basis to the State Registrar or her designee. If for some reason a monthly inventory cannot be performed, DMV must immediately notify the State Registrar.

ACCOUNTING FOR SECURITY PAPER USAGE

Documentation is necessary in accounting for all security paper. Should there be a breach in security and certain control numbers appear on fraudulently issued vital records, it becomes

easier to trace the source of the paper, and to whom it was issued. *With daily accounting of security paper, any break in numerical sequence becomes evident immediately.*

Prior to loading the security paper in the printer, verify the audit control number on each sheet of security paper to be sure they are sequential and no security paper is missing. A record of each certification issued must be recorded either manually or electronically by the audit control number. The security paper must be used in numerical sequence. A daily accounting of security paper usage will alert the DMV staff if there is a missing number in sequence. If an audit control number is missing research shall be done to determine what happened.

Additional information regarding the security paper usage will be covered in Chapter 6.

CHAPTER 6 – ISSUANCE and CERTIFICATIONS

The Virginia Department of Health's Division of Vital Records is the official repository and the State Registrar is the official custodian of vital events (births, marriages, divorces and deaths) occurring in the Commonwealth of Virginia.

A birth certificate is the document or information provided by the hospital staff or attendant at birth on the facts of a live birth.

A death certificate is the document filed by a funeral director, next of kin or the Virginia State Anatomical Program on the facts of a death.

A marriage and divorce certificate are filed by the Circuit Court Clerks on the facts of the marriage and divorce.

Each vital event provides vital information about the person whose name appears on the certificate. A certification or a certified copy of a birth, death, marriage or divorce certificate are considered for all legal purposes the same as the original certificate on file with the Division of Vital Records.

While originally intended for the sole purpose of the vital records registration system, birth, death, marriage and divorce certificates are now used for but not limited to employment purposes, travel, driver licenses, identification, passports, benefits, settle estates, state and national statistics and public health information.

WHAT VITAL RECORDS ARE AVAILABLE?

The Division of Vital Records of the Virginia Department of Health is the official repository and the State Registrar is the official custodian of vital records (birth, death, marriage, and divorce) occurring within the Commonwealth of Virginia. The below table list the vital records that are available through the Division of Vital Records.

Type of Vital Record	Years Available
Births	1912 - Present
Marriages	1936 - Present
Deaths	1912 - Present
Divorces	1918 – Present

Note: Birth records are public information 100 years after the date of the event. Death, marriage and divorce records become public information 25 years after the date of the event.

WHO IS ENTITLED TO A BIRTH, MARRIAGE, DIVORCE, OR MARRIAGE CERTIFICATE?

The following individuals are entitled to a certified copy of a birth, marriage, divorce or marriage certificate.

Registrant (the person whose personal information is registered)

Immediate family member of the registrant

- Self (except for death)
- Current Spouse
- Mother
- Father
- Adult Brother and Sister
- Maternal Grandparent (if mother's name is listed on the birth record)
- Paternal Grandparent (if father's name is listed on the birth record)
- Grandchild/Great Grandchild (Death certificate only)
- Funeral Director/Funeral Service Licensee (handle the decedent's disposition)
- Executor
- Attorney/Legal Representative
- Person with power of attorney (must be approved by your supervisor)
- Legal guardian (must submit legal custody order)

WHAT ARE THE CUSTOMER REQUIREMENTS?

Any person requesting a certified copy of a vital record must submit a written request. The application(s) as shown in Chapter 4 must be completed by the person requesting a certified vital record. The requester must present acceptable identification from the DVR Identification List and pay the appropriate fee. It is important that the CSR review the application with the requester to determine that they are entitled to the vital record and have provided sufficient information before accepting the application for processing.

Check the application for the following:

- Requester's contact information (name, address, telephone number)
- Requester's relationship to the registrant
- Reason for the vital record
- Requester's signature
- Registrant's information (name, date and place of the event, parents)

Note: The Division of Vital Records only has records for events that occurred in the Commonwealth of Virginia.

ACCEPTABLE IDENTIFICATION

Identification (ID) is required for all requests for a vital record (birth, death, marriage and divorce). The requester must submit one (1) document from the primary list or two (2) documents from the secondary list. The ID must be legible and intact. Below is the list of acceptable identification.

FORMS OF ACCEPTABLE IDENTIFICATION

Primary Documents

- Driver's license issued by a U.S. state, territory or jurisdiction, unexpired or expired for not more than one year.
- Learner's/instruction permit issued by a U.S. state, territory or jurisdiction, unexpired or expired for not more than one year.
- Photo identification card issued by a U.S. state, territory or jurisdiction, unexpired or expired for not more than one year.
- Current Photo ID card (school and employment with identification number). **Check Cashing Cards are not acceptable.**

- Unexpired U.S. military ID card of an active duty or retired member (ID cards of military dependents are not acceptable as primary identity documents).
- Unexpired U.S. passport or passport card.
- Unexpired foreign passport with a visa, I-94 or I-94W.
- U.S. Certificate of Naturalization (form N-550, N-570 or N-578).
- U.S. Certificate of Citizenship (form N-560 or N-561).
- U.S. Citizen Identification Card (form I-197).
- Unexpired Temporary Resident Card (form I-688).
- Unexpired Employment Authorization Card (form I-688A, I-688B or I-766).
- Unexpired Refugee Travel Document (form I-571).
- Unexpired Resident Alien Card, Permanent Resident Card, Northern Marianas Card (form I-551).
- A copy of the first and last page of an application for asylum (Request for Asylum in the United States)
- Consular Report of Birth Abroad of a Citizen of the United States of America (form FS-240) or Certification of Report of Birth Abroad of a Citizen of the United States of America (Form DS-1350 or FS-545)
- Virginia Criminal Justice Agency Offender Information Form.
- United States Probation Offender Information Form.

Secondary Documents (Require two of below selections)

- U.S. Selective Service Card.
- U.S. military discharge papers (form DD214).
- Certified copy of school records/transcript issued by a U.S. state, jurisdiction or territory.
- Health care insurance card.
- Life insurance policy.
- Certificate of Enrollment issued by the Virginia Department of Education.
- Unexpired welfare/social services identification card with photo, issued by a municipality.
- State-issued driver's license or learner's/instruction permit (other than Virginia), with photo, expired not more than five years.
- State-issued photo identification card (other than Virginia) expired not more than five years.

- U.S. passport or passport card -- expired not more than five years.
- Foreign passport -- expired not more than five years, with a U.S. visa.
- Unexpired military dependent ID card, with photo.
- Unexpired weapons or gun permit issued by federal, state or municipal government.
- Unexpired pilot's license.
- INS form I-797 (applicable only for individuals whose names appear on the form).
- USCIS student or dependent SEVIS I-20 with or without USCIS stamp (Applicant's name must appear on the form).
- U.S. Department of State form DA-2019 (Applicant's name must appear on the form).
- Veterans' Universal Access Identification Card.

ISSUING A CERTIFIED BIRTH, MARRIAGE, DIVORCE OR DEATH CERTIFICATE

Before a certified birth, marriage, divorce or death certificate can be issued, a CSR must have three items; (1) a completed vital record application from a qualified requester, (2) requester's acceptable identification, and (3) the appropriate fee. The fee is required for a certified copy of a vital record or for a search of the files when no copy is made. Again, it is important that the CSR review the application with the requester to determine that they are entitled to receive the vital record and they have provided sufficient information to locate the vital record before accepting the application for processing.

Once the applicant's eligibility has been established, the request must be entered into the web-based application. Within DVR employees use the Virginia Vital Events and Screening Tracking System (VVESTS) application. Virginia birth records, 1912 to present are automated and will be issued from VVESTS.

Before a CSR can execute the search for a birth, marriage, divorce or death certificate the CSR must first enter the requester's information and payment into the DMV web-based application. Once the CSR has completed this task they can then enter the registrant's information and execute the search for a birth, marriage, divorce or death certificate.

HOW TO SEARCH FOR A BIRTH, MARRIAGE, DIVORCE OR DEATH CERTIFICATE

The search screen will have mandatory fields that the CSR must complete before they can execute a search for the birth, marriage, divorce or death certificate.

Birth Certificate Search:

The most effective way to search for a birth certificate is by the child's first and last name, date of birth and mother's first and maiden name.

Marriage and Divorce Certificate Search:

To search for a marriage or divorce certificate names of each spouse are required, as well as the marriage/divorce date and place of marriage/divorce (city or county)

Death Certificate Search:

To search for a death certificate the name of the deceased, date of death and place of death (city or county) are required.

It is important to remember that the information provided by the requester may not match the information on the VDH certificate. This would result in the CSR receiving a reply that says "*No Match*" If this should occur, the CSR should confirm the information with the requester and ask for additional information. After three unsuccessful searches, a manager override will be required to conduct further searches.

PRINTING CERTIFIED VITAL RECORDS

There shall be a dedicated printer used for printing the certifications. This reduces the chances of lost or unaccounted for sheets of security paper. The security paper shall be loaded in the dedicated printer in the morning and unloaded in the evening.

All certifications shall be issued on security paper provided by the State Registrar. The security paper bears the signature of the State Registrar, Janet M. Rainey.

If your search returned a positive match you should see a screen shot similar to the one provided below. With birth certificates, if the Certificate Status says *“Print”* you can begin the print process. Death, marriage and divorce certificates do not have a print status.

The screenshot displays the 'mySelect (TEST Release 9.5.0)' web application interface. The main window shows a 'VDH Request (Step 2 of 2)' form. On the left, there are sections for 'Settlement Information' and 'Transaction Information'. The 'Settlement Information' section includes fields for Settlement Number (5314027001), Work Date (01/27/2014), and Type (CSC/On-Line Agent). The 'Transaction Information' section includes fields for Customer (T53100871), Name (BUELL, AIMEE), Birth Date (01/22/1999), Sex (FEMALE), Title, VIN, Plate, Permit, Citation, and Use Agree.

The main form area contains the following fields:

- birth Date: 01/22/1999
- Sex: FEMALE (F)
- Mother Maiden Name: VANHORN
- Mother First Name: TIFANY
- Middle Name: [Empty]
- Birth Place: [Empty]
- Father Last Name: [Empty]
- First Name: [Empty]
- Middle Name: [Empty]

Below the form, there is a section titled 'Results Returned from VDH' with the following data:

- Status: PRINT
- Status Reason: [Empty]
- Registrant Name: AIMEE BUELL
- Registrant Birth Date: JANUARY 22, 1999
- Registrant Sex: FEMALE
- Registrant Place of Birth: PINE, VIRGINIA
- DVR Document Number: 145-99-407065
- DVR Date Record Filed: FEBRUARY 08, 1999
- Type of Certificate: FULL
- Mother/Parent1 Name: TIFANY VANHORN
- Mother/Parent1 Place of Birth: VIRGINIA
- Mother/Parent1 Age: 32
- Father/Parent2 Name: NOEL TED KUNKEL
- Father/Parent2 Place of Birth: VIRGINIA
- Father/Parent2 Age: 34

The bottom of the screen shows the text: 'Virginia Department of Motor Vehicles 01/27/2014 4:30 PM'.

Ready to Print

Death Certificate Information

Funeral Home License: 1234567899


Last Name of Deceased: WALL
 First Name: SALLIE
 Middle Name: A
 Suffix:
 Date of Death: 06/22/1918
 Sex: FEMALE (F)
 Date of Birth: 01/01/1980
 Age at Death: 50

Less than One Year Old:

Place of Death: County: HALIFAX (HFA)
 City:
 Hospital Where Death Occurred:
 Parent/Mother Maiden Name: WALL
 First Name: LISA
 Middle Name: ANN
 Parent/Father Last Name: WALL
 First Name: JOHN
 Middle Name: S

Race of Deceased: White

DMV Select Message

 Match Found: View the Document before you Print.
Click Process to continue.

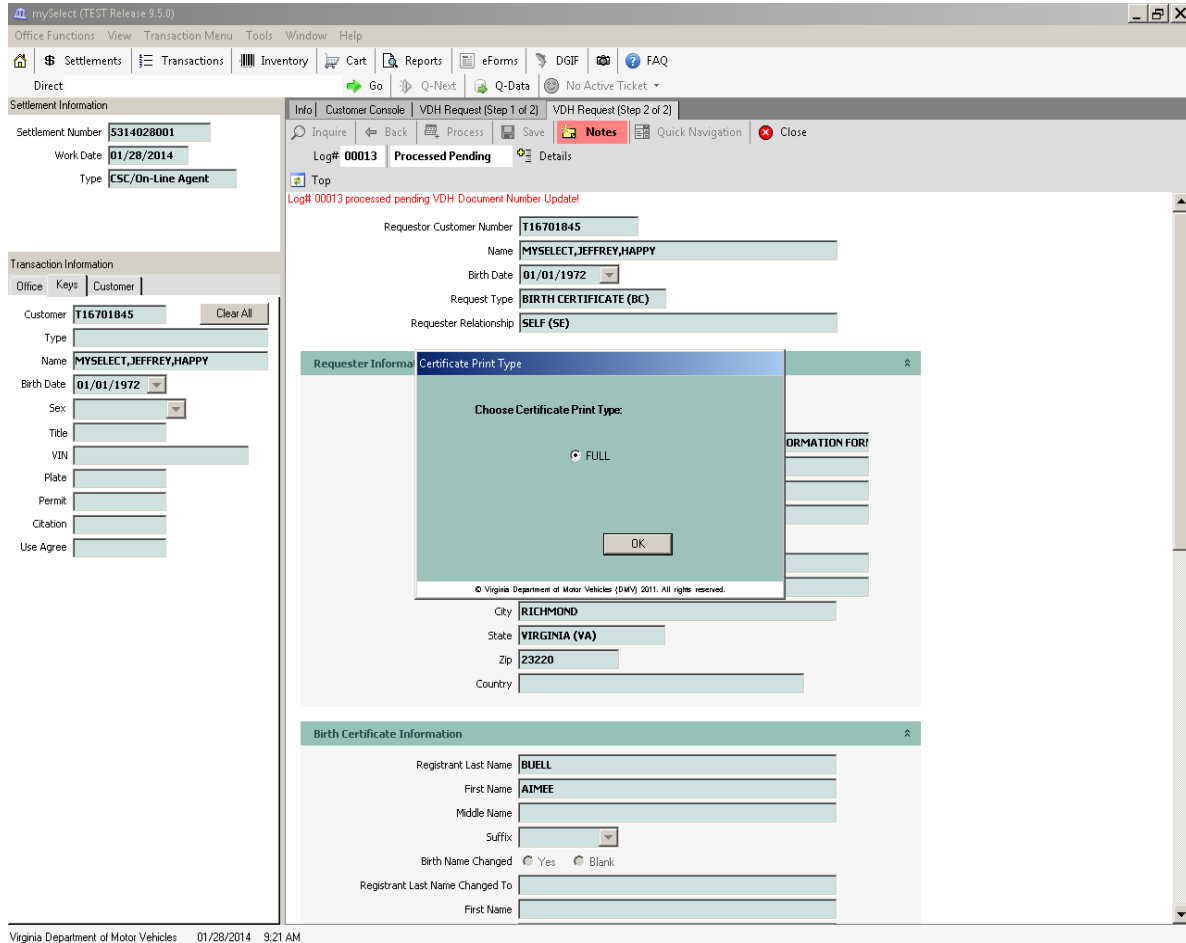
Different but similar screens will appear for marriage and divorce certificates

However, before you proceed you must review the information on the system for any discrepancies. For death, marriage, and divorce certificates, you must review the PDF of the matched record. You should look for the following discrepancies:

- Spelling of the names (child, mother, father, spouse)
- Difference in the date of event (birth, death, marriage and divorce)
- If the father is the requester his name must appear on the birth certificate, if not, do not print and refer him to the DVR. However, if he has custody paper you can issue the birth certificate.
- If a spouse is requesting a marriage, divorce or death certificate his/her name must be listed as the spouse.

If the discrepancies are noted by the requester, the requester is entitled, print the VDH certificate. Inform the requester if they have any questions or concerns to return the certificate with a letter of explanation to the DVR.

For birth certificates only, the search results will dictate the type of birth certification the CSR will print. The DVR issues four types of birth certification: Full, Mother Only, Father Only and AD-15. The CSR will select the appropriate choice from the system screen as seen below. Death, marriage, and divorce certificates do not have multiple types.



The type of certificate printed is based on the parent’s information. The below table explains the type of certificate the CSR should print.

Print	If
Full	The mother and father names, ages and place of birth appear on the birth certificate. A Full copy can be printed if the parent age is listed and the birth place is missing or the birthplace is listed and the age is missing.
Mother Only	Only the mother’s name, age and place of birth appear on the birth certificate.
Father Only	Only the father’s name, age and place of birth appear on the birth certificate.
AD15	Both parent’s name are listed, however, their age and place of birth is missing from the birth certificate.

Note: The CSR can only print the birth certificate if the Certificate Status states *Print*.

CERTIFICATION ERROR/VOID PROCEDURE

Unusable inventory must be deleted from the system in any of the following instances:

- The wrong type of certificate was printed
- Security paper was damaged in the printer
- More than the requested certification was printed (i.e. paid for one certificate but two printed)
- The wrong certificate was printed
- The requester refused to accept the certificate, however, certificate is needed if contacting DVR.
- The requester was not entitled to the certificate

If the void stems from a processed transaction, the CSR should write “void” through the certification and scan the document on the front counter scanner into the void bucket. The application associated with this transaction is attached to the original bar code cover sheet which printed upon the completion of the transaction, and then is scanned with the daily work on the back office scanner.

Inventory not attached to a transaction is marked void and scanned into the front-counter scanner into the void bucket.

A report of all void certifications/security paper shall be sent to the State Registrar or her designee. Such report shall contain the security paper audit control number and the reason why the certification was voided.

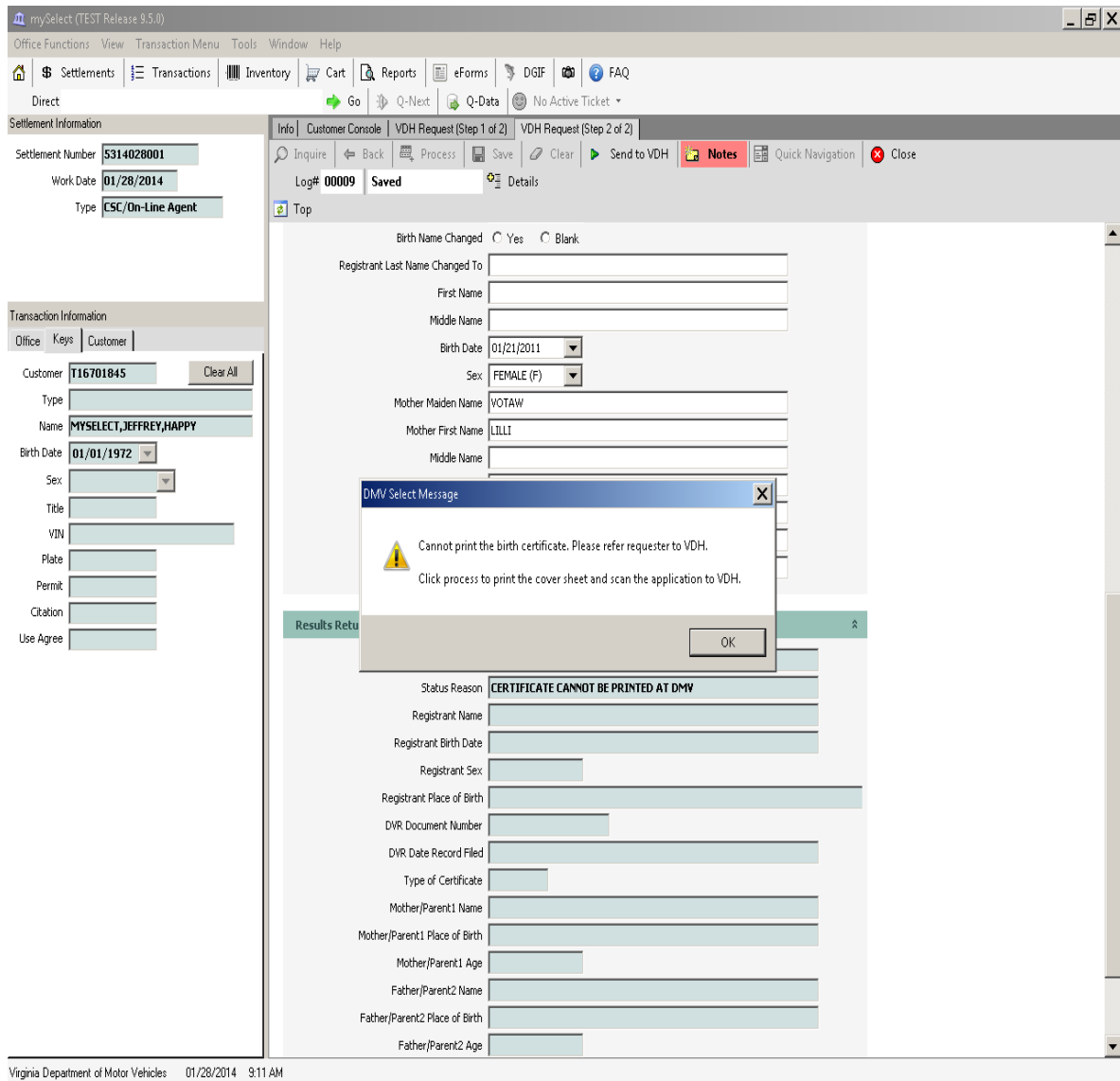
CHAPTER 7 – RECORDS WITH ALERT MESSAGES

Certain alert messages may appear on a certificate that may prevent the issuing of that certificate. A flag is placed on a certificate by the State Registrar or her designee for a number of reasons, some more serious than others. The print function may be suppressed and the CSR will not be able to issue the certificate. The flag on a certificate is confidential information and for internal use only. Serious problems can occur if procedures are not followed.

DO NOT TELL A PARENT, REGISTRANT, OR APPLICANT THAT THE RECORD HAS BEEN FLAGGED!

Never tell the requester the record is flagged or even indicate there is a problem with the record. Advise the requester that you are having difficulty printing the records and their application will be forwarded to DVR for processing.

When searching for a certificate, the CSR may receive a positive response; however, the certificate status (see example screen shot below) may indicate “Cannot print the birth certificate”. The certificate status informs the CSR whether the certificate can be printed and issued to the requester. A “Cannot print the certificate” status means an administrative flag has been placed on the record and the certificate cannot be printed. The system will indicate the type of certificate being searched.



AGAIN, DO NOT TELL A PARENT, REGISTRANT, OR APPLICANT THAT THE RECORD HAS BEEN FLAGGED!

ATTACHMENTS

The following attachments were referenced in the Chapters 5 and 6.

RECEIPT OF SECURITY PAPER

On _____ I received security paper from the Division of Vital
(Date)

Records. The audit control number starts with _____ and ends
with _____.

I certify that the order has been verified and everything is correct.

There was a discrepancy with the order and the incident report is attached.

Authorized Employee's Signature _____

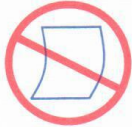
Branch Location _____

The original Receipt of Security Paper form should be returned to the State Registrar or her designee and a copy of the form should be retained by the DMV.

LASERMATE® PRESSURE SEAL USER'S REFERENCE GUIDE

TEMPERATURE & ATMOSPHERE

LASERMATE® PRESSURE SEAL forms were designed specifically for use in laser printers. Special care must be taken in manufacturing, packaging, storage, and handling of this product to ensure it will perform as expected. With this in mind, we provide this reference guide for your benefit.



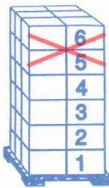
MOISTURE & CURL: For proper feeding and imaging in laser printers, these forms should be stored flat. Pressure seal forms are made from paper, and paper absorbs or loses moisture with changes in the relative humidity of the atmosphere. **Sudden changes in the temperature and/or relative humidity can cause the paper fibers in the forms to shrink or swell—creating the curl—and possibly jam in the printer.**

STORAGE INSTRUCTIONS



Never store pressure seal forms in extremely hot or cold conditions.

Temperature and humidity extremes will significantly shorten the shelf life of the forms and perhaps render them unusable. **We recommend these forms be stored at 68-76 degrees Fahrenheit and relative humidity of 35-55% in order to ensure a 12 month shelf life.**



Because the shelf life of this product is relatively short, always remember to **rotate form supplies**, e.g., first in, first out.

Never store pressure seal forms stacked more than 4 cartons high. Excessive pressure from overstacking can cause forms damage in the lower carton(s).

HANDLING RECOMMENDATIONS



Ink on the forms should be allowed to cure at least 2 weeks prior to laser printer processing.

Forms must then be stored in the laser printer's operating environment for at least 48 hours prior to their use. This allows the forms to acclimate and minimizes the potential for curl.



Open only enough material to be used for the job on hand. Close opened packages to prevent moisture loss or gain. Return unused forms to the protective plastic wrap, or substitute such as a ZIP-LOC® storage bag if the original has been destroyed, and reseal the package when printing is completed.



Fan the sheets lightly on all four sides prior to loading in the printer. Load forms according to the instructions in your laser printer operator manual and process as for other printing.

Operators: Control of curl from the printer is very important for efficient post processing.



FOR THE BEST SEALING RESULTS : Let forms stand for approximately 1 hour prior to post processing on the pressure seal equipment to allow any fuser oils on the sheet to be absorbed. It is recommended that once laser printed, forms should be placed back into their original carton, *curl side down*, along with a chipboard on top of the stack to help eliminate or prevent curling. Forms should be left in a climate controlled environment between printing and post processing, but *not* for longer than 24 hours.

1056.10566.g

SECURITY PAPER INCIDENT REPORT FORM

This form must be completed immediately upon detecting a problem with the security paper by the person authorized to receive the security paper.

Name: _____

Title: _____ Branch Location _____

Please check all boxes that apply and provide a detail description of the incident.

- Missing control numbers
- Security paper was damaged
- Audit control numbers on the individual packets are not sequential
- Other (please specify in the description)

Description: _____

Signature: _____ Date _____