



# VIP SERVICES

2012 Louisiana Street  
Houston, Texas 77002  
713-659-8472 1-800-856-8472 Fax 713-659-3767  
Website: [www.vippassports.com](http://www.vippassports.com) Email: [info@vippassports.com](mailto:info@vippassports.com)

## WORK ORDER REQUEST FORM

(RETURN THIS FORM WITH EACH REQUEST)

### BILLING INFORMATION:

CONTACT: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

### RETURN DOCUMENTS TO:

CONTACT: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

### BILLING INSTRUCTIONS:

AMOUNT ENCLOSED FOR DEPOSIT: \_\_\_\_\_  
  
YOUR COMPANY P.O. OR REF#: \_\_\_\_\_  
  
AUTHORIZED AMOUNT TO CHARGE MY  
CREDIT CARD: US\$ \_\_\_\_\_

### CREDIT CARD INFORMATION:

TYPE OF CARD: \_\_\_\_\_  
CARD #: \_\_\_\_\_  
EXPIRATION DATE: \_\_\_\_\_  
  
SIGNATURE OF CARD HOLDER  
REQUIRED: \_\_\_\_\_

STATE WHERE THE BIRTH OCCURRED: \_\_\_\_\_

WILL YOU REQUIRE THE BIRTH CERTIFICATE TO BE LEGALIZED BY THE EMBASSY? IF  
SO WHICH COUNTRY WILL THE DOCUMENT BE USED IN: \_\_\_\_\_

NUMBER OF ORIGINAL COPIES REQUIRED: \_\_\_\_\_

RETURN THE COMPLETED DOCUMENT BACK VIA: \_\_\_\_\_

DATE YOU NEED THE COMPLETED DOCUMENT: \_\_\_\_\_

PURPOSE FOR THE BIRTH CERTIFICATE: \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## BIRTH CERTIFICATE INSTRUCTION SHEET

APPLICATION (S) REQUESTED FOR: BIRTH CERTIFICATE-STATE OF MONTANA

### **DOCUMENTS REQUIRED:**

VALID PASSPORT:	<u>N/A</u>	APPLICATION (S):	<u>1</u>
PASSPORT TYPE PHOTO (S):	<u>N/A</u>	ITINERARY/TICKET:	<u>N/A</u>
COMPANY LETTER:	<u>N/A</u>	DRIVERS LICENSE:	<u>1-COPY</u>
COPY OF INVITATION:	<u>N/A</u>	RELEASE LETTER:	<u>1-NOTARIZED</u>
OTHER:	<u>***PLEASE SEE IMPORTANT NOTE BELOW***</u>		
	<u> </u>		
	<u> </u>		

PLEASE FORWARD THIS SHEET AND ALL THE ABOVE REQUIREMENTS TO THE ABOVE LISTED ADDRESS

### FEES PER PERSON:

STATE FEE:	<u>\$12.00</u>
VIP SERVICE FEE:	<u>\$75.00</u>
MONEY ORDER FEE:	<u>\$3.00</u>
OTHER FEES:	<u> </u>
*ADD RETURN DELIVERY:	<u> </u>
<b>TOTAL: (NO PERSONAL CHECKS PLEASE)</b>	<u> </u>

### \*FEDERAL EXPRESS FEES:

### \*\*VISA PROCESSING TIME

PRIORITY LETTER	\$29.00	REGULAR PROCESSING TIME:	<u>2 WEEKS</u>
2-DAY LETTER	\$23.50		
3-DAY LETTER	\$19.50		
SATURDAY LETTER	\$41.50		

COMMENTS: ON THE APPLICATION, PLEASE COMPLETE THE QUESTIONS REGARDING THE INFORMATION FOR THE CHILD LISTED ON THE BIRTH CERTIFICATE AND HOW MANY COPIES YOU ARE REQUESTING. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR OFFICE.

REVISED: 12-16-08 JEN

**PLEASE READ THESE INSTRUCTIONS CAREFULLY**

**WHO CAN ORDER A BIRTH CERTIFICATE?**

Only those authorized by 50-15-121 MCA, which includes the registrant (14 years old or older), the registrant's spouse, children (with proof of relationship), parents, or guardian, or an authorized representative, or those who provide documentation showing it is needed for determination or protection of the individuals personal or property rights, proof of relationship, guardianship, or authorization is required may obtain certified copy of a birth record.

Step-relatives, in-laws, grandparents, aunts, uncles, cousins, ex-spouses, and a natural parent of an adoptive child are not eligible to receive a certified copy of a birth certificate.

**IDENTIFICATION IS REQUIRED**

The person signing the request must provide an enlarged legible photocopy of both sides of their valid driver's license or other legal picture identification with a signature or the requestor must have this application notarized.

**Suggested Identification**

Picture ID with a Signature	OR Two Forms of ID – One MUST have a Signature	OR
<ul style="list-style-type: none"> <li>• Driver's License</li> <li>• State ID Card</li> <li>• Passport</li> <li>• Military ID Card</li> <li>• Tribal</li> </ul>	<ul style="list-style-type: none"> <li>• Social Security Card</li> <li>• Work ID Card</li> <li>• Car registration/Insurance</li> <li>• Doctor/Medical record</li> <li>• Fishing License</li> <li>• US Military DD214</li> <li>• Utility Bill with a current address</li> <li>• Voter Registration Card</li> </ul>	<ul style="list-style-type: none"> <li>• Credit/Debit/ATM Card</li> <li>• School ID Card</li> <li>• Library Card</li> <li>• Insurance Record</li> <li>• Pay Stub</li> <li>• Traffic/ Pawn ticket</li> <li>• Court record</li> <li>• Year Book</li> </ul>
		<ul style="list-style-type: none"> <li>• Notarized Montana Office of Vital Statistics Statement to Identify certified Birth or Death Certificate Applicant form (you must provide the original letter, not a photocopy or faxed copy)</li> <li>• Have an authorized family member that has an ID order the certificate</li> </ul>

If a picture ID with a signature is not available, two other forms of identification are required; one **MUST** have a signature. Please include photocopies of **both sides** of the ID when mailing your request

**IMPORTANT: If the identification requirement is NOT met or if the application is incomplete, your request will be returned and significant delays in processing your order may occur.**

**FEE (All fees must be U.S. funds)**

- **CERTIFIED COPIES OF A BIRTH CERTIFICATE** cost \$12.00 for the first copy, \$5.00 for each additional copy of the same record. **(non-refundable)**
- **INFORMATIONAL COPIES OF A BIRTH CERTIFICATE** may be issued to anyone as long as the birth occurred 30 years prior to the date of application, **the cost is \$10.00. (non-refundable)**
- **CERTIFIED COPIES OF DOCUMENTS** on file with the state (i.e. Acknowledgment of Paternity, correction affidavits), **the cost is \$12.00 (non-refundable)**
- **SEARCHES**: \$10.00 for the first 5 years searched, then \$1.00 per year over the first five years per name requested. (An informational copy will be issued if record is found) **(non-refundable)**

**Please complete the following information.**

**FULL** First, Middle and Last Name on Birth Certificate: \_\_\_\_\_

Has name ever been changed other than marriage \_\_\_\_ No \_\_\_\_ Yes if so original name \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth (City or County): \_\_\_\_\_

Mother's **Full Maiden** Name: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ # of copies needed \_\_\_\_\_

Your relationship to the certificate holder : \_\_\_\_\_ ( self, mother, father etc) Reason the Birth Certificate is needed: \_\_\_\_\_

**Mailing or Delivery Address:**

Name: \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Daytime Telephone Number: \_\_\_\_\_

**Notary (For use if needed)**

\_\_\_\_\_ personally appeared before me and whose identity I proved on the basis of satisfactory evidence to be the signer of the above instrument.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_  
 Notary Public in and for the State of \_\_\_\_\_  
 Residing at \_\_\_\_\_ My commission Expires \_\_\_\_\_

**SEAL**

**Official Use Only**

Date \_\_\_\_\_

Rec# \_\_\_\_\_

Amount \_\_\_\_\_

Cert # \_\_\_\_\_

Ser # \_\_\_\_\_

Comment \_\_\_\_\_

\_\_\_\_\_

**NOTICE: STATE LAW PROVIDES PENALTIES FOR PERSONS WHO WILLFULLY AND KNOWINGLY USE OR ATTEMPT TO USE THIS CERTIFICATE FOR ANY PURPOSE OF DECEPTION. (50-15-114, MCA)**



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## RELEASE LETTER

VITAL RECORDS OFFICE

I, \_\_\_\_\_, AUTHORIZE YOUR VITAL RECORDS OFFICE TO DISCUSS THE STATUS OF THE BIRTH CERTIFICATE FOR \_\_\_\_\_ WITH “**VIP SERVICES**” AND/OR DEANNA MARTINEZ, AS THEY WILL BE EXPEDITING MY SERVICE.

I AM THE:

- CHILD LISTED ON THE BIRTH CERTIFICATE
- BIOLOGICAL MOTHER LISTED ON BIRTH CERTIFICATE
- BIOLOGICAL FATHER LISTED ON BIRTH CERTIFICATE
- LEGAL REPRESENTATIVE OF THE CHILD/MOTHER/FATHER LISTED ON BIRTH CERTIFICATE
- OTHER: (SPECIFY/SHOW RELATIONSHIP) \_\_\_\_\_  
\_\_\_\_\_

SINCERELY,

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME-PRINT

THIS SIGNATURE WAS WITNESSED BEFORE ME ON THIS \_\_\_\_\_ OF \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
NOTARY SIGNATURE & SEAL