

MassHealth Citizenship & Identity Documentation Requirements

READ THIS DOCUMENT CAREFULLY THIS IS A TOOL TO ASSIST YOU IN PROCESSING VG OR MBR APPLICATIONS

Important: Seniors (persons 65+) and disabled individuals who receive Medicare or Supplemental Security Income (SSI) will probably not have to provide citizenship and identity documents. This is because these individuals have already met documentation requirements for the Medicare and/or SSI programs.

Please ask all patients the following three questions when completing a VG or MBR application:

1. Have you or any member of your household received cash assistance from the Department of Transitional Assistance for a 3 month period or longer? If so please indicate members who received this assistance.
2. Are you or any members of your household receiving Medicare coverage? If so please indicate the members who received this assistance below.
3. Do you or any member of your household receive or have you/they received Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)? If so please indicate the members who receive/received this coverage.

If the patient's answer to ANY ONE of these three questions is "Yes," it is likely they will not have to provide documentation verifying their citizenship and identity, as they will already have met these requirements.

If the patient answered "No" to all the above questions, he/she will have to provide the documentation. To help them do that, please follow the instructions listed below to get the necessary documents (submission of these documents will be handled centrally at 729 MassAve.):

The following is a listing of documents that may be used to verify Identity & Citizenship:

MassHealth applicants who are U.S. citizens and need to verify U.S. citizenship may request a verification of birth by completing one of the two attached documents:

1. Massachusetts No-Cost Request for Verification of Birth – (persons born in Massachusetts)
2. Out-of State Request for Verification of Birth (persons born in any other state except Massachusetts)

To Obtain a Massachusetts ID:

Complete an application for a Mass ID, the patient must fill out the form is available at any [RMV service office](#). You may also use the attached form. Present the application form, \$15. fee and appropriate documentation, in person, to any [RMV full service office](#) to receive your ID.

The patient must present the following:

- Social Security Card or valid, current U.S. or non-U.S. Passport
- Document proving date of birth
- Document proving signature
- Document proving Massachusetts residency

BCHCP staff, please make a copy of any of these documents or any other identity documents that might not be listed here, but which patient has available:

Passport
Driver's License
Certificate of US citizenship
Certificate of naturalization
Military ID
School ID
Alien Registration Card (Green Card)
Foreign Passport
Visas
Photo Document from INS
Military dependent's identity card
Social Security Card
**Please make CLEAR copies of the front and back copy of each document, mail to 729 Mass Ave. in the attached stamped envelope, and fax to:
Finance Dept. at: 617-414-5418**

Please ask patient to leave a telephone number, contact person, or Shelter Name where we can locate them to follow up with identity & citizenship information.



New Citizenship Documentation Requirements

New!

Due to a change in Federal law, effective July 1, 2006, MassHealth now requires individuals who state they are U.S. citizens or nationals to provide acceptable documentation of their citizenship and identity when first applying for MassHealth or upon MassHealth redetermination.

- ✓ **Verification of citizenship and identity is a one-time activity.** Members who have verified citizenship and identity satisfactorily will not be asked to do so again.
- ✓ **The new Federal Law does not include changes for documented immigrants,** who must continue to provide proof of their status when they apply for MassHealth.
- ✓ **MassHealth will use electronic data matching to the greatest extent possible and allowable** to assist members with fulfilling this new requirement.

Timeframes:

- ⇒ **Applicants:** MassHealth coverage will not begin until all necessary documentation, including proof of citizenship and identity, are submitted within the necessary timeframes. MassHealth will inform applicants when documents are due - either 60 or 30 days, depending on coverage type.
 - **Time-limited presumptive coverage for pregnant women and children will not be delayed** pending documentation of citizenship and identity, but this documentation must still be submitted within 60 days of application in order for MassHealth benefits to continue.
- ⇒ **Current members:** MassHealth requires a redetermination of eligibility at least once each year. When a member's redetermination is due, the member will be notified that they have either 60 or 30 days, depending on coverage type, to provide documentation of citizenship and identity. These timeframes may be extended if the member indicates to MassHealth that he or she is making a good faith effort to submit the documentation.

Phone Numbers for Assistance in Obtaining Necessary Documentation:

- ⇒ **To receive or renew a Passport:** National Passport Information Center, U.S. Department of State: 1-877-487-2778
- ⇒ **For Certificate of Naturalization or Certificate of U.S. Citizenship:** U.S. Department of Homeland Security: 1-800-375-5283 / TTY 1-800-767-1833
- ⇒ **For Massachusetts Birth Certificates:** Registry of Vital Records and Statistics, Massachusetts Department of Public Health: 150 Mount Vernon Street, 1st Floor, Dorchester, MA 02125-3105, 617-740-2600
- ⇒ **For a Massachusetts Driver's License or Massachusetts ID card:** Massachusetts Registry of Motor Vehicles: 617-351-4500 / TTY 617-536-7534 or 1-877-768-8833
- ⇒ **General questions:** MassHealth Customer Service: 1-800-841-2900 / TTY 1-800-497-4648

Please see next page for acceptable documentation to verify citizenship and identity.

U.S. Citizenship/National Status and Identity Requirements for MassHealth Effective 7/1/06 from the Federal Deficit Reduction Act of 2005

Proof of both U.S. Citizenship/National Status and Identity*

(*Exception: Seniors and disabled persons who get or can get Medicare or Supplemental Security Income (SSI) do NOT have to provide proof of their U.S. citizenship/national status and identity.)

The following **First-Level Documents** may be accepted as proof of **BOTH U.S. citizenship/national status AND identity**. (No other documentation is required.) Individuals born outside the U.S. who were not U.S. citizens/nationals at birth must submit first-level documentation. Adopted children born outside the U.S. may establish citizenship under the Child Citizenship Act.

1. a U.S. passport; or
2. a Certificate of Naturalization (DHS Form N-550 or N-570); or
3. a Certificate of U.S. Citizenship (DHS Form N-560 or N-561).

OR

Proof of U.S. Citizenship/National Status Only (Submit documentation from the highest level possible!)



Proof of Identity Only

The following **Second-Level Documents** may be accepted as proof of U.S. citizenship/national status only.

- A U.S. public record of birth (including the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam (on or after April 10, 1899), the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, Swain's Island, or the Northern Mariana Islands (after November 4, 1986). The individual may also be collectively naturalized under federal regulations. The birth record must have been issued before the person turned age 5.
- A Report of Birth Abroad of a U.S. Citizen (Form FS-545, Form FS-240, or Form DS-1350)
- A U.S. Citizen ID card (INS Form I-197 or I-179)
- An American Indian Card (I-872 with the classification code KIC) issued by the Department of Homeland Security (DHS) to identify U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border
- Final adoption decree showing the child's name and U.S. place of birth (if adoption is not finalized, a statement from a state-approved adoption agency)
- Evidence of U.S. civil service employment before June 1, 1976
- An official military record showing a U.S. place of birth
- A Northern Mariana Identification Card (I-873) issued by the INS to a collectively naturalized citizen of the United States who was born in the Northern Mariana Islands before November 4, 1986

The following **Third-Level Documents** may be accepted as proof of U.S. citizenship/national status only.

- Extract of U.S. hospital record of birth on hospital letterhead that was created at least 5 years before the initial application date. Except for children under age 16, the hospital record can be near the time of birth. A souvenir birth certificate is not acceptable.
- Life, health, or other insurance record showing a U.S. place of birth that was created at least 5 years before the initial application date

The following **Fourth-Level Documents** may be accepted as proof of U.S. citizenship/national status only.

- Federal or state census record showing U.S. citizenship or a U.S. place of birth and person's age
- Admission papers, indicating a U.S. place of birth, from a nursing home or other institution
- Medical (clinic, doctor, or hospital) record indicating a U.S. place of birth that was created at least 5 years before the initial application date. Except for children under age 16, the medical record can be near the time of birth
- Other documents that show a U.S. place of birth that were created at least 5 years before the application for MassHealth: Seneca or Navajo Indian tribal census records, U.S. State Vital Statistics official notification of birth registration, an amended U.S. public birth record that was amended more than 5 years after the person's birth, or a statement from a physician/midwife who was in attendance at the birth
- Written affidavit**

The following documents may be accepted as proof of identity only.

1. A state driver's license containing the individual's photo or other identifying information
2. A government-issued identity card containing the individual's photo or other identifying information
3. Certificate of Indian Blood or other U.S. tribal document with photo or other identifying information
4. U.S. military card or draft record
5. School identity card with photo
6. Military dependent's identity card
7. U.S. Coast Guard Merchant Mariner card
8. For children under age 16: a day-care or nursery school record with photo, or a parental or guardian affidavit attesting to the child's date and place of birth that is signed under penalty of perjury (cannot be used if an affidavit for citizenship was provided)

****Affidavits (written statements) should be used only in rare circumstances when the applicant or member is unable to provide evidence of U.S. citizenship/national status from any other source listed.** Two affidavits must be submitted. One of the two affidavits must be from an individual who is **not** related to the applicant or member. Each individual providing an affidavit must have personal knowledge of the event(s) establishing the applicant's or member's claim of U.S. citizenship/national status; for example, the date and place of the applicant's birth in the United States. The individuals providing the affidavits must also provide proof of both their own U.S. citizenship/national status and identity for the affidavit to be accepted. If these individuals also know why documentary evidence of the applicant's or member's claim of U.S. citizenship/national status cannot be provided, this should be included in the affidavit. The applicant or member (or other knowledgeable individual) must also provide a separate affidavit explaining why this evidence cannot be provided.

Information for people seeking no-cost verification of birth to document citizenship for MassHealth application

Since July 1 the federal Deficit Reduction Act has required **all applicants for Medicaid who are US citizens** to verify their identity and their citizenship. The Massachusetts legislature has said that Medicaid applicants born in Massachusetts may get verifications of birth to document their citizenship free of charge. The Registry of Vital Records and Statistics is currently working with MassHealth to develop a system to accomplish this as quickly and easily as possible.

In the interim, applicants may request a no-cost verification of birth to document their citizenship by writing to:

Registry of Vital Records
150 Mt. Vernon St., 1st Floor
Dorchester MA 02125

This verification fulfills the US citizenship documentation requirement only; it does not fulfill the identity requirement. The request should include the following information:

- Subject's full name
- Subject's date of birth
- Names of parents (including mother's maiden name)
- Place of birth
- Signature of the applicant
- Return address where verification should be mailed

The Registry is committed to helping residents meet the DRA requirements. The new law will greatly increase the Registry's volume of requests, which may also increase the time needed to fill them.

IMPORTANT: Applicants must show that they are applying for Medicaid in order to receive the verifications at no cost. The Registry suggests that requests be made on the letterhead of the healthcare provider or health access program helping with the application, and that it be noted that the request is for the purpose of a MassHealth application. Another option is to include a copy of a notice from MassHealth requesting documentation of citizenship.

8/31/06 This summary was prepared by Community Partners from information received from the Registry of Vital Records and Statistics.

TO: Registry of Vital Records
150 Mt. Vernon Street, 1st Floor
Dorchester, MA 02125

DATE: _____

RE: Request for a no-cost verification of birth

The person named below is requesting a **no-cost verification of birth** for the purpose of applying for MassHealth.

PLEASE PRINT:

(Full name)

(Date of birth)

(City or town of birth)

(Father's name)

(Mother's name, including maiden name)

Please return the verification of birth to this address:

Check here if the birth verification is going to someone other than the applicant.

*By signing, I am giving the Massachusetts Registry of Vital Records and Statistics **permission to share** this verification of birth with the above named person or organization for the purpose of MassHealth application.*

SIGNED: _____

(Signature of applicant)



REQUEST FOR VERIFICATION OF MASSACHUSETTS BIRTH RECORD

Please fill out and return this form to the **Registry of Vital Records and Statistics, 150 Mt. Vernon St., 1st Floor, Dorchester, MA 02125-3105**. The Massachusetts Registry of Vital Records and Statistics will process your request and furnish this information to MassHealth for purposes of satisfying the citizenship requirement for MassHealth applicants and members. Requests can be processed only for individuals born within Massachusetts. It is important that all information is completed for each member who is requesting verification of Massachusetts birth. Please be sure that information such as names and place of birth are accurate and reflect the information on record at the time of birth. You will not be charged a fee for this request.

BIRTH RECORD

Name of Subject: _____ (first) (middle) (last)	
Date of Birth: _____	City or Town of Birth: _____
Mother's Name: _____ (first) (middle) (last)	
Father's Name: _____ (first) (middle) (last)	

BIRTH RECORD

Name of Subject: _____ (first) (middle) (last)	
Date of Birth: _____	City or Town of Birth: _____
Mother's Name: _____ (first) (middle) (last)	
Father's Name: _____ (first) (middle) (last)	

BIRTH RECORD

Name of Subject: _____ (first) (middle) (last)	
Date of Birth: _____	City or Town of Birth: _____
Mother's Name: _____ (first) (middle) (last)	
Father's Name: _____ (first) (middle) (last)	

BIRTH RECORD

Name of Subject: _____ (first) (middle) (last)	
Date of Birth: _____	City or Town of Birth: _____
Mother's Name: _____ (first) (middle) (last)	
Father's Name: _____ (first) (middle) (last)	



BOSTON HEALTH CARE FOR THE HOMELESS PROGRAM

729 Massachusetts Avenue • Boston, MA 02118-2318
Administrative Office: (617)414-7779 • Fax: (617)414-7776 • TTY: (617)522-3674

**Request for Individual Birth Record
(Out-of-State Requests)**

PLEASE PRINT:

(Full name at birth)

(Date of birth)

(City or town of birth)

(Father's name)

(Mother's name, including maiden name)

Enclosed you will find a money order/check in the amount of \$_____. Please send the birth certificate to BHCHP at the following address:

Attn. Finance Department
Boston Health Care for the Homeless Program
729 Massachusetts Avenue
Boston, MA 02118

SIGNED: _____

(Signature of applicant)



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Attn. Finance Department
Boston Health Care for the Homeless Program
729 Massachusetts Avenue
Boston, MA 02118

SIGNED: _____

(Signature of applicant)

How to Get a Photo ID from RMV

1. Patient must first have a birth certificate or verification of birth.
2. Patient also needs a Social Security card, if possible. If the card has been misplaced, patient can go to a Social Security office (10 Malcolm X Blvd., 151 Causeway, or any convenient office) with an EBT or ATM card, library card, Mass Transit Card, hospital card, VA card, and/or any other kind of identification the patient may have, as well as a letter from the case manager identifying the patient (see attached samples) and request a new card. If the patient is successful, Social Security will probably issue a temporary receipt with the official stamp, which sometimes works at RMV. Otherwise, the patient will have to wait until the card comes in the mail. If the patient is unsuccessful, the case manager should accompany the patient to Social Security with his/her own ID to vouch for the patient.
3. Then, have patient gather the birth certificate or verification of birth, Social Security card, a letter from the case manager (see attached samples), a signature verification from the case manager (see attached sample), and/or **any other possible identification documents** such as an EBT or ATM card, library card, Mass Transit Card, hospital card, VA card, and/or any other kind of identification the patient may have, and \$20.
4. The patient should bring these documents and the \$20 to the Registry of Motor Vehicles office at 630 Washington St. and request an identity card.
5. If that doesn't work, and it may not, the case worker should go with the patient to the RMV office with her/his own ID to vouch for the patient.

September 18, 2006

To Whom It May Concern:

Homeless Patient (DOB 00/00/00, SS# 000-00-0000) has been a patient at the Barbara McInnis House and has been known to me for a year. Most recently, he has been a patient since 0/00/00. Mr. Patient is a black male with white hair and stands at 6'5". He is also known to our Benefits Coordinator, Welfare Specialist, and she can speak to his reference at (617) 488-1700. Mr. Patient has always presented as a well-mannered gentleman. Please allow him to acquire a duplicate of his Social Security card. If you have any questions, please call me at (617) 488-1700 or page me at (781)-221-6565. Thank you for your consideration.

Sincerely,

Case Manager

June 26, 2006

To Whom It May Concern:

Homeless Patient (DOB 00/00/00, SS# 000-00-0000) has been a patient at the Barbara McInnis House and is known to me and our organization. Most recently, he has been a patient since 0/00/00. Mr. Patient is a white male with light brown hair and blue eyes and stands at 5'10". He is also known to our Nurse Practitioner, Provider Smith, and she can speak to his reference at (617) 488-1706. Mr. Patient has always presented as a well-mannered gentleman. Please allow him to acquire a MA identification card with this letter of reference, his birth certificate, and the various other forms of identification he has in his possession. If you have any questions, please call me at (617) 488-1706 or page me at (781)-221-6565. Thank you for your consideration.

Sincerely,

Case Manager

August 31, 2006

To Whom It May Concern:

Homeless Patient (DOB 00/00/00, SS# 000-00-0000) has been a patient at the Barbara McInnis House and is known to me and members of our staff. He has been a patient since X/XX/XX. Mr. Patient is a white male with white and grey hair and stands at 6'1". He is also known to his Nurse Practitioner, Provider Smith, and she can speak to his reference at (617) 488-1706. Mr. Patient has always presented as a well-mannered gentleman. Please allow him to acquire a duplicate of his MA driver's license. As reported to me by Mr. Patient, he is already on file in your database. If you have any questions, please call me at (617) 488-1706 or page me at (781)-221-6565. Thank you for your consideration.

Sincerely,

Case Manager

January 29, 2007

To Whom It May Concern:

Applicant Signature

John Doe (DOB _____, SS# _____, Medical Record # _____) has been a patient at the Barbara McInnis House and is known to me and our organization. Most recently, he has been a patient since [date]. Mr. Doe [physical description]. He is also known to _____, and she can speak to his reference at [phone number]. I have asked him to sign above and verify that this is his signature. Please allow him to acquire a MA ID with this letter of reference, his birth certificate, and Social Security Card. If you have any questions, please call me at [phone number]. Thank you for your consideration.

Sincerely,

[name]
[title]

How to Request a Birth Certificate

IMPORTANT:

This document is meant to make the process of obtaining a birth certificate for a US Citizen as simple as possible. *Hampshire HealthConnect can take no responsibility for the accuracy of this information.*

FEES FOR BIRTH CERTIFICATES HAVE AND WILL CONTINUE TO CHANGE AND RISE AS THE DEMAND FOR COPIES OF THESE DOCUMENTS GROWS.

DIRECTIONS:

- All applications must be filled out completely and signed. A copy of the Applicant's State ID or Driver's License must be attached in order to verify identity. These items must be legible (enlarged and lightened). Most states require that the person sign beneath the ID.
- You are eligible to request a certified copy of a person's birth certificate for most states only if you are the applicant, the parent or legal guardian of the applicant, or if you have a court order that will allow you to have access to the certificate.
- The fee for all birth certificates, known as the Request Fee, is non-refundable. This fee includes the cost of searching for the certificate and the cost of one certified copy of the certificate. If the birth certificate is not found, the person will receive notification that it could not be located. Most states will keep your request on record for a minimum of one year and continue to look for it. If the certificate is found later they will send the applicant a copy.
- Additional Fees that may apply to applications can be any of the following:
 - o Credit Card surcharges
 - o Electronic system surcharges (Vitalcheck or US Certs)
 - o A fee for additional copies of the certificate that is requested at the same time.
- Please pay attention to the fees column as prices vary.

REQUEST COLUMN:

- Mail- applications sent by mail and returned by mail
- Person- application is brought to the county or state office in person and the birth certificate is handed to them or mailed at a later time.
- Fax- the application is faxed either directly to the office or through Vitalcheck or US Certs.
- Phone- requests are taken by phone either directly to the office or through Vitalcheck or US Certs
- Electronically- applications are accepted by either Vitalchecks and/or US Certs

State:	Website Address:	Address:	Phone Number:	Fees:	Request:	US Certs:	Vitalcheck:	Application Link:
Alabama	http://ph.state.al.us/chs/VitalRecords/Birth/BIRTH.HTML	Alabama Vital Records, P. O. Box 5625, Montgomery, Al 36103-5625	(334) 206-5418	\$12 Request Fee;\$4 Fee for Additional Copies	Mail; Person; Electronically		^	http://ph.state.al.us/chs/VitalRecords/Universal/dl.pdf

How to Request a Birth Certificate

Alaska	http://www.hss.state.ak.us/dph/bvs/birth/default.htm	Bureau of Vital Statistics, 5441 Commercial Blvd, PO Box 110675, Juneau, AK 99801-0675	(907) 465-3391	\$20 Request Fee; \$11 Surcharge if Credit Card is used.	Mail; Person; Fax; Electronically	^	http://www.hss.state.ak.us/dph/bvs/birth/birth_form.pdf
American Samoa	N/A	American Samoa Government, Department of Health, Health Information Office, Pago Pago, AS 96799	(684) 633-1406	\$5 Request Fee	Person; Mail		N/A
Arizona	http://www.azdhs.gov/vitalrcd/birth_index.htm	Arizona Department of Health Services, Office of Vital Records, P.O. Box 3887, Phoenix, AZ 85030	(888) 816-5907	\$10 Request Fee for 1990-Present; \$15 Request Fee for before 1990.	Mail; Person; Electronically	^	http://www.azdhs.gov/vitalrcd/images/birthappl_small_add.pdf
Arkansas	http://www.healthysarkas.com/certificates/certificates.html	Vital Records Slot H-44, PO Box 1437, Little Rock, AR 72203-1437	(866) 209-9482	\$12 Request Fee; \$10 Fee for Additional Copies	Person; Mail		Same as website
California	http://www.dhs.ca.gov/hisp/chs/ovr/ordercert.htm	California Department of Health Services, Office of Vital Records - M.S. 5103, P.O. Box 997410, Sacramento, CA 95899-7410	(916) 445-2684	\$14 Request Fee	Person; Mail		http://www.dhs.ca.gov/publications/forms/pdf/vs111.pdf
Canal Zone	N/A	Vital Records Section, Passport Services, U.S. Department of State, 1111 19th Street NW, Suite 510, Washington, DC 20522-1705	(202) 955-0307	\$30 Request Fee; \$20 Fee for Additional Copies	Person; Mail		Request must be notarized, with the following information: - Full name of individual - Date and place of birth - Name of parents

How to Request a Birth Certificate

Colorado	http://www.cdphe.state.co.us/hs/certs.asp	Vital Records Section, Colorado Department of Public Health and Environment, 4300 Cherry Creek Drive South, HSRD-VS-A1, Denver, CO 80246-1530	(303) 692-2200	\$15 Request fee; \$6 Fee for Additional Copies; \$6 Surcharge if Credit Card is used	Mail; Person; Fax; Electronically	^	^	http://www.cdphe.state.co.us/hs/bicert.pdf
Connecticut	http://www.dph.state.ct.us/PB/HISR/VR_FAQs.htm	Dept of Public Health, Vital Records Office, 410 Capitol Ave., MS#11VRS, P.O. Box 340308, Hartford, CT 06134-0308	(860) 509-7700	\$5 Request Fee from County; \$15 Request Fee from State Vital Records	Mail; Person			http://www.dph.state.ct.us/PB/HISR/vs-39bst.pdf
Delaware	http://www.dhss.delaware.gov/dhss/dph/ss/vitalstats.html	Federal and Water Streets, Dover, DE 19901	(877) 888-0248	\$10 Request Fee per copy	Mail; Person; Telephone; Electronic		^	http://www.dhss.delaware.gov/dhss/dph/ss/files/birth.pdf
District of Columbia	http://www.dchealth.dcgov/doh/cwp/view,a,1371,q,581955,dohNav_GID,1787,dohNav,33120.asp	Vital Records Division, 825 North Capitol Street, NE, First Floor, Washington, DC 20002	(202) 671-5000	\$23 Request fee for Originals; \$18 Request Fee for Computer certificate (Short Form)	Mail; Person; Phone		^	N/A
Florida	http://www.doh.state.fl.us/planning_eval/vital_statistics/birth_death.htm	Department of Health Office of Vital Statistics P.O. Box 210 1217 Pearl Street Jacksonville, FL 32231-0042	(904) 359-6900 ext 9000	\$9 Computer Certification (1930-Present); \$14 Photocopy Certification (1917-present); \$4 Fee for Additional Copies	Mail; Person; Fax; Electronically		^	http://www.doh.state.fl.us/planning_eval/vital_statistics/birthform.pdf
Georgia	http://health.state.ga.us/programs/vitalrecords/birth.asp	Vital Records, 2600 Skyland Drive, NE, Atlanta, GA 30319 3640	(404) 679-4701	\$10 Request Fee; \$5 Fee for Additional Copies	Mail; Person; Electronically		^	http://health.state.ga.us/pdfs/vitalrecords/birth.pdf

How to Request a Birth Certificate

Guam	N/A	Office of Vital Statistics, Department of Public Health and Social Services, Government of Guam, P.O. Box 2816, Agana, GU, M.I. 96910	(671) 734-4589	\$5 Request Fee	Mail			N/A
Hawaii	http://www.hawaii.gov/health/vital-records/vital-records/index.html	State Department of Health, Office of Health Status Monitoring, Vital Records Section, P.O. Box 3378, Honolulu, HI 96801-9984	(808) 586-4533	\$10 Request Fee; \$4 Fee for Additional Copies	Mail; Person			http://www.hawaii.gov/health/vital-records/pdf/birth.pdf
Idaho	http://www.healthandwelfare.idaho.gov/portal/alias_Rainbow/lang_en-US/tabID_3335/DesktopDefault.aspx	Bureau of Health Policy and Vital Statistics, P.O. Box 83720, Boise, ID 83720-0036	(208) 334-5988	\$13 Request Fee; \$13 Fee for Additional Copies	Mail; Person; Electronically		^	http://www.healthandwelfare.idaho.gov/Portals/Rainbow/Documents/health/VSCertificateRequest.pdf
Illinois	http://www.idph.state.il.us/vitalrecords/birthfaq.htm#1	Illinois Department of Public Health, Division of Vital Records, 605 W. Jefferson St., Springfield, IL 62702-5097	(800) 252-8980	\$15 Request Fee; \$2 Fee for Additional Copies	Mail; person; Fax; Electronically		^	http://www.idph.state.il.us/vitalrecords/vital/pdf/birthfrm.pdf
Indiana	http://www.in.gov/isdh/bdcertifs/birthanddeathcertificates.htm	2 North Meridian Street, INDIANAPOLIS, IN 46204	(866) 601-0891	\$10 Request Fee; \$4 Fee for Additional Copies	Mail; Person; Fax; Phone; Electronically		^	http://www.in.gov/isdh/bdcertifs/49607.pdf
Iowa	http://www.idph.state.ia.us/eh/healthstatistics.asp	Iowa Department of Public Health Bureau of Health Statistics Lucas State Office Building, 1st Floor Des Moines, Iowa 50319- 0075	(515) 281-4944	\$15 Request fee; \$5.50 Surcharge if a Credit card is used.	Mail; Person; Phone			http://www.idph.state.ia.us/eh/common/pdf/vitalrecords/applicationcertifiedcopyvitalrecord.pdf

How to Request a Birth Certificate

Kansas	http://www.kdheks.gov/vital/birth.html	Office of Vital Statistics Curtis State Office Building 1000 SW Jackson, Suite 120 Topeka, KS 66612-2221	(785) 296-3253	\$12 Request Fee; \$7 Fee for Additional Copies	Mail; Person; Electronically; Phone			http://www.kdheks.gov/vital/download/birth.pdf
Kentucky	http://chfs.ky.gov/dph/vital/	Office of Vital Statistics 275 E. Main St. 1E-A Frankfort, KY 40621	(877) 817-7362	\$10 Request Fee	Mail; Person; Fax; Electronically; Phone			http://chfs.ky.gov/NR/rdonlyres/9627347C-B7B4-4ED4-AE87-8D02822D84FC/0/vs37II.pdf
Louisiana	http://www.dhh.louisiana.gov/offices/page.asp?id=252&detail=6489	Louisiana Vital Records Registry P.O. Box 60630 New Orleans, LA 70160	(504) 219-4500	\$9 Request Fee for Short Forms; \$15 Request Fee for Long Form	Mail; Person; Electronically			http://www.dhh.louisiana.gov/offices/publications/pubs-252/Package%2011%20Ordering%20Certificates.pdf
Maine	http://www.maine.gov/dhhs/faq.htm#certificates	Office of Vital Records 244 Water Street, Station 11 Augusta, ME 04333-0011	(207) 287-3181	\$15 Request Fee; \$6 Fee for Additional Copies	Mail; Person; Electronically			N/A
Maryland	http://www.vsa.state.md.us/vsa/html/birth.html	Division of Vital Records 6550 Reisterstown Road Reisterstown Road Plaza Baltimore, MD 21215	(800) 832-3277	\$12 Request Fee	Mail; Person; Electronically			http://www.vsa.state.md.us/vsa/apps/abcapp.pdf
Massachusetts	http://www.mass.gov/?pageID=eohhs2terminal&L=4&L0=Home&L1=Consumer&L2=Basic+Needs&L3=Vital+Records&sid=Eeohhs2&tb=terminalcontent&f=dph_vital_records_c_obtaining_copies&sid=Eeohhs2#bymail	Registry of Vital Records and Statistics 150 Mt. Vernon Street, 1st Floor Dorchester, MA 02125-3105	(617) 740-2600	\$18 Request Fee in person; \$28 Fee by mail; \$42.50 Fee electronically/by phone/by fax; \$37 Fee for Additional Copies for all but in person	Mail; Person; Fax; Phone; Electronically			http://www.mass.gov/Eeohhs2/docs/dph/vital_records/mail_order_form.pdf

How to Request a Birth Certificate

Michigan	http://www.michigan.gov/v/mdch/1,1607,7-132-4645---,00.html	Vital Records Requests PO Box 30721 Lansing MI 48909	(517) 335-8666	\$26 Request Fee; \$12 Fee for Additional Copies	Mail; Person			http://www.michigan.gov/documents/birthapp_6360_7.PDF
Minnesota	http://www.health.state.mn.us/divs/chs/osr/index.html	Minnesota Department of Health Attention: Office of the State Registrar P.O. Box 64882 St. Paul, Minnesota 55164-0882	(651) 201-5970	\$16 Request Fee; \$9 Fee for Additional Copies	Mail; Person; Fax; Electronically			http://www.health.state.mn.us/divs/chs/osr/birthapp.pdf
Mississippi	http://www.msdh.state.ms.us/msdhsite/static/31,1951,109.html	Mississippi Vital Records P.O. Box 1700 Jackson, MS 39215-1700	(601) 576-7981	\$7 Request Fee for Short Form; \$12 Request Fee for Long Form; \$3 Fee for Additional copies either way	Mail; Person; Phone; Electronically			http://www.msdh.state.ms.us/phs/forms/form522.pdf
Missouri	http://www.dhss.mo.gov/BirthAndDeathRecords/applications.html	Missouri Department of Health and Senior Services Bureau of Vital Records P.O. Box 570 Jefferson City, MO 65102	(573) 751-6387	\$15 Request Fee; \$15 Fee for Additional Copies	Mail; Person; Electronically			http://www.dhss.mo.gov/BirthAndDeathRecords/birthdeath.pdf
Montana	http://vhsp.dphhs.mt.gov/certificates/ordercertificates.shtml	Office of Vital Statistics Department of Public Health and Human Services 111 N Sanders Rm 209 PO BOX 4210 Helena MT 59604	(406) 444-2685	\$12 Request Fee; \$5 Fee for Additional Copies	Mail; Person; Fax; Electronically			http://vhsp.dphhs.mt.gov/certificates/birthappfillable.pdf
Nebraska	http://www.hhs.state.ne.us/ced/nevrinfo.htm	Nebraska Department of HHS Finance & Support Vital Records P.O. Box 95065 Lincoln, NE 68509-5065	(402) 471-2871	\$12 Request Fee	Mail; Person; Electronically			http://www.hhs.state.ne.us/ced/birth.pdf

How to Request a Birth Certificate

Nevada	http://health2k.state.nv.us/forms/formindex.htm	Office of Vital Records and Statistics 505 E. King Street, Room 102 Carson City, Nevada 89701-4749	(775) 684-4242	\$13 Request Fee	Mail; Person			http://health2k.state.nv.us/forms/formtypes/birthcertapp.pdf
New Hampshire	http://www.sos.nh.gov/vitalrecords/ELIGIBILITY.html	NEW HAMPSHIRE DIVISION OF VITAL RECORDS ADMINISTRATION REGISTRATION / CERTIFICATION 29 HAZEN DRIVE CONCORD, NEW HAMPSHIRE 03301-6527	(800) 852-3345 ext. 4651	\$12 Request Fee; \$8 Fee for Additional copies	Mail; Person; Electronically; Phone	^		http://www.sos.nh.gov/vitalrecords/General%20Info/BirthApp.pdf
New Jersey	http://www.nj.gov/health/vital/tips.shtml	New Jersey Bureau of Vital Statistics and Registration Attn: - Customer Service Unit PO Box 370 Trenton, NJ 08625-0370	(609) 292-4087	\$25 Request Fee; \$2 Fee for Additional copies	Mail; Person; Fax; Electronically	^		http://www.nj.gov/health/forms/reg-3.pdf
New Mexico	http://dohewbs2.health.state.nm.us/VitalRec/Birth%20Certificates.htm#person	New Mexico Vital Records Post Office Box 26110 Santa Fe, NM 87502	(505) 841-4185	\$10 Request Fee	Mail; Person			http://dohewbs2.health.state.nm.us/VitalRec/Web%20Birth%20App.pdf
New York	http://www.health.state.ny.us/vital_records/birth.htm	New York State Department of Health Vital Records Section Certification Unit P.O. Box 2602 Albany, NY 12220-2602	N/A	\$30 Request Fee	Mail; Person; Fax; Electronically	^		http://www.health.state.ny.us/vital_records/forms/doh-4380.pdf
New York City	http://www.nyc.gov/html/doh/html/vr/vrbappl.shtml	31 Chambers Street, Room 103, New York, NY 10007	(212) 788-4520	\$15 Request Fee; \$5.50 mailing fee	Mail; Person; Fax; Electronically; Phone	^		http://www.nyc.gov/html/doh/downloads/pdf/vr/birth1.pdf

How to Request a Birth Certificate

North Carolina	http://vitalrecords.dhhs.state.nc.us/vr/requests/	North Carolina Vital Records 1903 Mail Service Center • Raleigh, NC 27699-1903	(919) 733-3526	\$15 Request Fee; \$5 Fee for Additional copies	Mail; Person; Electronically			http://vitalrecords.dhhs.state.nc.us/vr/pdf/bcertificatapp.pdf
North Dakota	http://www.health.state.nd.us/vital/birth.htm	Division of Vital Records 600 E. Boulevard Ave. - Dept. 301 Bismarck, ND 58505-0200	(701) 328-2360	\$7 Request Fee; \$4 Fee for Additional copies	Mail; Person; Fax; Phone; Electronically			http://www.health.state.nd.us/vital/birth.pdf
Northern Mariana Islands	N/A	Commonwealth Recorder Superior Court Vital Records Section P.O. Box 307 Saipan, MP 96950	N/A	\$10 Request Fee	Mail; Person			N/A
Ohio	http://www.odh.ohio.gov/vitalstatistics/vitalstats.aspx	Ohio Department of Health Vital Statistics 246 N. High Street, 1st Floor, Revenue Room P.O. Box 15098 Columbus, Ohio 43215-0098	(614) 466-2531	\$16.50 Request Fee	Mail; Person; Electronically	^	^	N/A
Oklahoma	http://www.health.state.ok.us/program/vital/brec.html	Writing to: Vital Records Service Oklahoma State Department of Health 1000 Northeast 10th Oklahoma City, OK 73117	(405) 271-4040	\$10 Request Fee	Mail; Person; Electronically		^	http://www.health.state.ok.us/program/vital/vs151R9-03.pdf
Oregon	http://oregon.gov/DHS/ph/chs/order/faqs.shtml#orderhow	OREGON VITAL RECORDS PO BOX 14050 PORTLAND OR 97293-0050	(971) 673-1190	\$20 request fee; \$14 Fee for Additional Copies	Mail; Person; Fax; Electronically; Phone		^	http://oregon.gov/DHS/ph/chs/order/docs/birthor.pdf

How to Request a Birth Certificate

Pennsylvania	http://www.dsf.health.state.pa.us/health/cwp/view.asp?a=168&Q=202219#MailingAddress	Division of Vital Records 101 South Mercer Street, Room 401 PO Box 1528 New Castle, PA 16101	(800) 724-3258	\$10 Request Fee	Mail; Person; Electronically; Fax			http://www.dsf.health.state.pa.us/health/lib/health/old_dir/vitalrecords/forms/pdfs/Birth by mail.pdf
Puerto Rico	N/A	Department of Health Demographic Registry P.O. Box 11854 Fernandez Juncos Station San Juan, PR 00910	(787) 767-9120	\$5 Request Fee	Mail; Person			N/A
Rhode Island	http://www.health.ri.gov/chic/vital/index.php	3 Capitol Hill Room 101 Providence, RI 02908-5097	(401) 222-2812	\$15 Request Fee; \$10 Fee for Additional Copies	Mail; Person			http://www.health.ri.gov/chic/vital/Birth Web.pdf
South Carolina	http://www.scdhec.net/vr/birth.htm	S.C. DHEC Division of Vital Records 2600 Bull Street Columbia, South Carolina 29201	(803) 898-3630	\$12 Request Fee; \$3 Fee for Additional Copies	Mail; Person			http://www.scdhec.net/vr/pdf/cbbc.pdf
South Dakota	http://www.state.sd.us/doh/VitalRec/vital.htm#Birth	600 E. Capitol Pierre, SD 57501	(605) 773-4961	\$10 Request Fee	Mail; Person; Phone; Electronically			http://www.state.sd.us/doh/VitalRec/Forms/BirthRecordApp.pdf
Tennessee	http://www2.state.tn.us/health/vr/index.htm	Tennessee Vital Records Central Services Building 1st Floor 421 5th Avenue North Nashville, Tennessee 37247	(615) 741-1763	\$12 Request Fee; \$4 Fee for Additional Copies	Mail; Person; Electronically			http://www2.state.tn.us/health/vr/ph-1654.pdf
Texas	http://www.dshs.state.tx.us/vs/reqproc/certified_copy.shtm	Texas Vital Records Department of State Health Services P.O. Box 12040 Austin, TX 78711-2040	(888) 963-7111	\$22 Request Fee	Mail; Person			http://www.dshs.state.tx.us/vs/reqproc/forms/vs142.3.pdf

How to Request a Birth Certificate

Utah	https://health.utah.gov/vitalrecords/silver/birthinfosecure.htm	Office of Vital Records and Statistics 288 North 1460 West PO Box 141012 Salt Lake City, UT 84114-1012	(801) 538-6105	\$15 Request Fee; \$8 Fee for Additional Copies	Mail; Person; Electronically			http://healthvermont.gov/research/records/birth_form.aspx
Vermont	http://healthvermont.gov/research/records/complete_birth.aspx	Vital Records, Vermont Department of Health, P.O. Box 70, 108 Cherry Street, Burlington, VT 05402-0070	8028637275	\$9.50 Request Fee	Mail; Person			N/A
Virginia	http://www.vdh.virginia.gov/vitalrec/index.asp	VDH, Office of Vital Records and Health Statistics P.O. Box 1000 Richmond, Virginia 23218-1000	(804) 662-6200	\$12 Request Fee	Mail; Person; Electronically			Same as website
Virgin Islands- St.Croix	N/A	Department of Health Vital Statistics Charles Harwood Memorial Hospital St. Croix, VI 00820	N/A	\$15 Request Fee by Mail; \$12 Request Fee in Person	Person; Mail			N/A
Virgin Islands- St.Thomas/St. John	N/A	Department of Health Vital Statistics Knud Hansen Complex St. Thomas, VI 00802	(340) 774-9000	\$15 Request Fee by Mail; \$12 Request Fee in Person	Person; Mail			N/A
Washington	http://www.doh.wa.gov/ehsphi/chs/cert.htm	Department of Health Center for Health Statistics P.O. Box 9709 Olympia WA 98507-9709	(360) 236-4313	\$17 Request Fee	Mail; Person; Fax; Phone			http://www.doh.wa.gov/ehsphi/chs/110-039_mail.pdf
West Virginia	http://www.wvdhhr.org/bph/oehp/hsc/vr/birtcert.htm#birth	Vital Registration Room 165 350 Capitol Street Charleston, WV 25301-3701	(304) 558-2931	\$10 Request Fee	Mail; Person; Electronically			http://www.wvdhhr.org/bph/oehp/hsc/vr/birthfm.htm

How to Request a Birth Certificate

Wisconsin	http://www.dhfs.state.wi.us/vitalrecords/birth.htm	Wisconsin Vital Records Office P.O. Box 309 Madison, WI 53701-0309	(608) 266-1373	\$12 Request Fee; \$3 Fee for Additional Copies	Mail; Person; Fax			http://dhfs.wisconsin.gov/forms/dph/dph05291.pdf
Wyoming	http://wdh.state.wy.us/vital_records/certificate.asp	Vital Records Services Hathaway Building Cheyenne, WY. 82002	(307) 777-7591	\$12 Request Fee	Mail; Person			http://wdh.state.wy.us/vital_records/forms/birthapl.htm
Birth certificates for U.S. citizen born in another country: Consular Report of a Birth Abroad	http://travel.state.gov/passport/get/first/first_825.html	Vital Records Section Passport Services 1111 19th St, NW, Suite 510 Washington DC 20522	(202) 955-0307	\$30 Request Fee	Mail			N/A

Identification Requirements

For most transactions, including license conversions, applicants over the age of 18 must present four forms of ID which include:

- SSN Card or valid, current US or non-US passport
- Proof of date of birth
- Proof of signature
- Proof of Mass residency

Applicants under 18 years of age are not required to provide proof of residence or signature.

At least one of these documents must be from the Primary list of documents listed in this brochure.

Social Security Number

All customers must have a valid Social Security Number (SSN) to apply for a Massachusetts learner's permit, driver's license, or ID card. If you do not have a SSN, you will need to visit your local Social Security Administration (SSA) office to apply for one.

Customers are required to present a Social Security Number (SSN) that validates with the Social Security Administration. If the customer does not have one, an **acceptable** written denial notice, not more than 30 days old, from the Social Security Administration (SSA) is required.

The SSA does not include any visa information on the written denial notice. Therefore, evidence of an acceptable visa code, in addition to the written denial notice, from the SSA is required.

Chart Guide

ID Requirements Chart

(List of required documents for each transaction)

1. Locate the transaction you are applying for in the left column.
2. Locate the column across the top of the chart that identifies your age; then look down that column until you reach the box in the same row as the transaction you've chosen.
3. Read the identification documents that are required.
4. Refer to the list of Primary and Secondary documents to the right of the chart to determine which documents you have that meet the requirements.
5. Bring your documents with you when visiting a Registry branch.



Massachusetts Registry of Motor Vehicles
T21761-0906

What Identification Do I Need To Bring to the Registry?

**For customers applying for a Learner's Permit,
Driver's License, Massachusetts ID or Liquor ID**

Dear Registry Customers,

This brochure describes the identification documents you are required to bring to a Registry branch to prove your identity. Please read the following information to be sure you understand the identification documents required of you.



**Massachusetts
Registry of Motor Vehicles**

Anne L. Collins
Registrar

September, 2006

Document Requirements Chart

Applying for	Required documents for applicants 17 years of age and under	Required documents for applicants 18 years of age and over
Change Date of Birth	<ul style="list-style-type: none"> 1 Primary document proving date of birth 	<ul style="list-style-type: none"> 1 Primary document proving date of birth
Permit	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport 1 Primary document proving date of birth <p>Parent/Guardian's consent (signature) is required on the application.</p>	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Document proving date of birth Document proving signature Document proving Massachusetts residency <p><i>(One of the documents, other than a SSN card or passport, must be a Primary document)</i></p>
Out-of-State Permit Conversion	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Current out-of-state Permit Certified copy of driving record not more than 30 days old <p>Parent/Guardian's consent (signature) is required on the application.</p> <p><i>Note: Driver's Education Certificate is required to schedule a road test to obtain a License.</i></p>	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Current out-of-state Permit Document proving Massachusetts residency Certified copy of driving record not more than 30 days old
License	<ul style="list-style-type: none"> Permit 	<ul style="list-style-type: none"> Permit
License Renewal	Not applicable.	<ul style="list-style-type: none"> Current License
Duplicate of License, MA ID, or Liquor ID	ID is required if not imaged.	ID is required if not imaged.
Out-of-State License Conversion with previous Massachusetts License expired less than 4 years	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Certified copy of driving record not more than 30 days old Out-of-state License* <p>Parent/Guardian's consent (signature) is required on the application.</p> <p>* If the out-of-state License does not have a photo, an acceptable photo ID from the list of Primary and Secondary documents is required.</p> <p><i>Note: Must convert Driver's Education Certificate or complete Driver's Education in Massachusetts</i></p>	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Document proving Massachusetts residency Out-of-state License* <p>* If the out-of-state License does not have a photo, an acceptable photo ID from the list of Primary and Secondary documents is required.</p> <p><i>If the License is from Canada, Mexico, or US Territory (including Puerto Rico), a certified driving record, not more than 30 days old, is required.</i></p>
Out-of-State License Conversion with previous Massachusetts License expired more than 4 years OR with no previous Massachusetts License	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport 1 Primary document proving date of birth Certified copy of driving record not more than 30 days old Out-of-state License* (may be used as a Primary document to prove date of birth.) <p>Parent/Guardian's consent (signature) is required on the application.</p> <p>* If the out-of-state License does not have a photo, an acceptable photo ID from the list of Primary and Secondary documents is required.</p> <p><i>Note: Must convert Driver's Education Certificate or complete Driver's Education in Massachusetts.</i></p>	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Document proving date of birth Document proving signature Document proving Massachusetts residency Out-of-state License* (may also be used as a Primary document to prove date of birth or signature, but cannot be used for both.) <p>* If the out-of-state License does not have a photo, an acceptable photo ID from the list of Primary and Secondary documents is required.</p> <p><i>If the License is from Canada, Mexico, or US Territory (including Puerto Rico), a driving record, not more than 30 days old, is required.</i></p>
Out-of-state License Conversion (if customer does not have the out-of-state License)	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport 1 Primary document proving date of birth Acceptable photo ID from the list of Primary and Secondary documents (may be used as a Primary document to prove date of birth.) Certified copy of driving record not more than 30 days old <p>Parent/Guardian's consent (signature) is required on the application.</p> <p><i>Note: Must convert Driver's Education Certificate or complete Driver's Education in Massachusetts</i></p>	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Document proving date of birth Document proving signature Document proving Massachusetts residency Acceptable photo ID from the list of Primary and Secondary documents (may also be used as a Primary document to prove date of birth or signature, but cannot be used for both.) Certified copy of driving record not more than 30 days old
Massachusetts ID Cannot hold a valid driver's License	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport 1 Primary document proving date of birth <p>Parent/Guardian's consent (signature) is required on the application.</p>	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Document proving date of birth Document proving signature Document proving Massachusetts residency <p><i>(One of the documents, other than a SSN card or passport, must be a Primary document)</i></p>
Liquor ID Must be 21 years or older Cannot hold a valid Massachusetts License	Not applicable - applicant must be 21 years or older.	<ul style="list-style-type: none"> SSN Card or valid, current U.S. or Non-U.S. Passport Document proving date of birth Document proving signature <p><i>(One of the documents, other than a SSN card or passport, must be a Primary document)</i></p>

Primary Documents (P)

At least one (1) document must be from this group:

- Current or expired U.S. or non-U.S. passport with photograph and signature. Not valid if expired more than 12 months. (Acceptable for date of birth or signature only.)
- Current or expired Massachusetts Firearms Card, with photograph, signature, address and date of birth. Not valid if expired more than 12 months. (Acceptable for residence or date of birth or signature.)
- Current or expired U.S. military (or military dependent) ID with photograph, signature, and date of birth. Not valid if expired more than 12 months. (Acceptable for date of birth or signature.)
- Current or expired U.S. Coast Guard Merchant Mariner card with photograph, signature, and date of birth. Not valid if expired more than 12 months. (Acceptable for date of birth or signature only.)
- Current Massachusetts learner's permit, driver's license, or RMV issued Massachusetts ID card. (Acceptable for residence or date of birth or signature.)
- Expired Massachusetts driver's license or ID card. (Not valid if expired more than 12 months. Acceptable for residence or date of birth or signature.)
- Current or expired out-of-state license with photograph, applicant's signature, and date of birth that is issued by a state, territory, or possession of the United States, the District of Columbia, a province of Canada, or a state of Mexico or the Federal District of Mexico City (a certified copy is acceptable). (Acceptable for date of birth or signature.)
- Original birth certificate issued in the United States or its territories or a copy certified by the agency that issued the original certificate or a copy certified by a Bureau of Vital Statistics or a state Board of Health within the United States (a hospital issued certificate is not acceptable). (Not expired more than 12 months. Acceptable for date of birth only.)
- Certified or attested copy of a court order of a federal, state, or county court within the United States that contains a raised court seal and includes the applicant's full name and date of birth (examples include an adoption document, a name change document, and a gender change document). (Acceptable for date of birth but if used for residence must be dated within 12 months of RMV application.)
- Certain Bureau of Citizenship and Immigration Services documents and other U.S. Government immigration documents.

Acceptable Immigration Documents	
(May be acceptable for date of birth or signature only) If the document has an expiration date which has passed, the document is not acceptable.)	
1. Certificate of Naturalization	N-550, or N-570
2. Certificate of Citizenship	N-560, or N-561
3. U.S. Citizen Identification Card	I-179 or I-197
4. Resident Alien Card ("Green Card")	I-151, I-551, AR-2, AR-3
5. Temporary Resident Identification Card	I-688
6. Non-Resident Alien Canadian Border Crossing Card	I-185 or I-586
7. Record of Departure (in valid Foreign Passport)	I-94 (Departure Record)
The I-94 and the valid foreign Passport it is within, count as only one (1) Acceptable Document.	
8. Processed for I-551 stamp (in valid, Foreign Passport)	
9. Permanent Resident Re-entry Permit.....	I-327
10. Refugee Travel Document	I-571
11. Employment Authorization Card	I-688A, I-688B, I-766
12. Documents specific to the applicant based upon decisions of the U.S. Department of State, U.S. Department of Justice (including Executive Office for Immigration Review, Board of Immigration Appeals and former Immigration and Naturalization Service), or U.S. Department of Homeland Security (including Bureau of Citizenship and Immigration Services.)	

Secondary Documents (S)

No more than two (2) documents can be from this group:

- Home mortgage or lease; or loan contracts (examples include Retail Installment Sale Agreement, and Motor Vehicle Installment Sale Contract), with the applicant's name and signature. (Acceptable for signature but if used for residence must be dated within 12 months of RMV application.)
- Life insurance policy with the applicant's name, signature, and date of signing. (Acceptable for residence or signature but if used for residence must be dated within 12 months of RMV application.)
- U.S. military discharge papers (DD 214), with the applicant's date of birth and signature. (Acceptable for date of birth or signature only.)
- (i) A bank passbook with applicant's name and address printed or written in a designated place in the passbook; (ii) A bank statement or transaction-related document (no more than 60 days old) on a form generated by the issuing bank and displaying the bank's name and mail address, and the applicant's name and mail address, received through mail by applicant; or (iii) A checkbook with the applicant's pre-printed name and address. (Acceptable for residence only.)
- Canceled personal check (copy acceptable if printed on a sheet with other cancelled checks and issued as part of a monthly statement by the bank) with signature of applicant and preprinted address on the check and dated not more than 60 days earlier. (Acceptable for residence or signature.)
- Original or certified copy of a divorce decree. (To the extent that the decree contains the information, it may be acceptable for residence or signature but must be dated in the appropriate place within 12 months of RMV application if used for residence.)
- Original or certified copy of a marriage certificate. (Acceptable for residence, signature or date of birth but must be dated within 12 months of RMV application if used for residence.)
- Original or certified copy of a non-U.S. birth certificate (if not in English, must be accompanied by an acceptable translation). (Acceptable for date of birth only.)
- Current or expired ID (not expired more than 12 months) with photograph and applicant's signature, issued by a U.S. agency, the District of Columbia, a state or state agency (but not a state college/university ID), a municipality, a territory, or a possession of the United States, a province of Canada, or a state of Mexico or the Federal District of Mexico City. (Acceptable for signature only.)
- Bureau of Indian Affairs or Indian Treaty Card (tribal ID is not acceptable.)
- A utility bill (gas, electric, wired telephone, wired cable, or heating oil delivery bill) (no more than 60 days old) or a property tax or an excise tax bill that is for the current or the immediate prior year and that contains the applicant's name and address. (Acceptable for residence.)
- Original Massachusetts Department of Correction (DOC) Certificate of Discharge or Release.
- Current or expired non-U.S. driver's license with applicant's signature. Not valid if expired more than 12 months. (If not in English, it must be accompanied by an International Driving Permit or another acceptable translation). (Acceptable for signature only.)
- Tuition bill, not more than 12 months old, or student loan coupons, with a due date of not more than 12 months old, with applicant's current Massachusetts address. (Acceptable for residence only.)
- Original school transcript with name and address. (Acceptable for residence if not more than 12 months old with applicant's current Massachusetts address.)
- Original or certified copy of a baptismal certificate, provided the original certificate was issued within 1 year of the applicant's birth by a church in the United States and contains the applicant's date of birth. (Acceptable for date of birth only.)
- Original letter issued and signed by the principal, headmaster, or official keeper of the records of a Massachusetts school (including a college or university) that is on the letterhead of the school and states the applicant is currently a resident student and includes the applicant's name and date of birth. (Acceptable for date of birth and residence but must be dated within 12 months of RMV application if used for residence.)

NOTE: It is not the function of RMV employees to advise you about which documents to present. No specific type of document on either list is required or preferred. In following these policies and procedures, RMV employees apply the same eligibility requirements to all applicants equally, without regard to race, sex, creed, national origin, or English speaking ability. The issuance of a driver's license, learner's permit, or ID card is not a determination of whether or not a person has legal or illegal immigration status. That is the responsibility of the Bureau of Citizenship and Immigration Services.