



RULE-MAKING ORDER PERMANENT RULE ONLY

CR-103P (December 2017) (Implements RCW 34.05.360)

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STATE OF WASHINGTON
FILED

DATE: June 05, 2020

TIME: 4:35 PM

WSR 20-13-017

Agency: Department of Health

Effective date of rule:

Permanent Rules

31 days after filing.

Other (specify) 01/01/2021 (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

Yes No If Yes, explain: Engrossed Substitute Senate Bill 5332 (Chapter 148, Laws of 2019), which replaces existing chapter 70.58 RCW governing vital records, becomes effective on January 1, 2021. This rule is necessary to implement the law.

Purpose: Chapter 246-491 WAC, Certificates. The Department of Health (department) adopted new sections of rule to prescribe the information displayed on certifications and informational copies of birth and death records and establish a formalized procedure with required documentation for individuals requesting certifications and informational copies. In chapter 246-491 WAC, Certificates, the department amended sections of rule to add a non-binary sex designation option on a certification of death and make technical updates. WAC 246-491-990 is amended to establish new fees associated with the issuance of certifications and informational copies. In chapter 246-490 WAC, Vital Statistics, department amended sections of rule to make technical updates and repealed obsolete sections of rule.

Citation of rules affected by this order:

New: WAC 246-491-159, 246-491-300, 246-491-310, 246-491-320, 246-491-330, 246-491-340, 246-491-350, 246-491-360, 246-491-370

Repealed: WAC 246-491-001, 246-490-055, 246-490-065

Amended: WAC 246-491-010, 246-491-039, 246-491-149, 246-491-990, 246-490-305

Suspended: None

Statutory authority for adoption: Engrossed Substitute Senate Bill 5332 (Chapter 148, Laws of 2019)

Other authority:

PERMANENT RULE (Including Expedited Rule Making)

Adopted under notice filed as WSR 20-08-126 on 04/01/2020 (date).

Describe any changes other than editing from proposed to adopted version: None

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

Name: Katitza Holthaus

Address: Department of Health, Center for Health Statistics, PO Box 47814, Olympia, WA 98504

Phone: 360-236-4311

Fax: N/A

TTY: 711

Email: vitalrecordsrules@doh.wa.gov

Web site: www.doh.wa.gov

Other: N/A

**Note: If any category is left blank, it will be calculated as zero.
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.**

The number of sections adopted in order to comply with:

Federal statute:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Federal rules or standards:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Recently enacted state statutes:	New	<u>9</u>	Amended	<u>5</u>	Repealed	<u>3</u>

The number of sections adopted at the request of a nongovernmental entity:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted in the agency's own initiative:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

New	<u>9</u>	Amended	<u>5</u>	Repealed	<u>3</u>
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The number of sections adopted using:

Negotiated rule making:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Pilot rule making:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Other alternative rule making:	New	<u>9</u>	Amended	<u>5</u>	Repealed	<u>3</u>

Date Adopted: 06/05/2020

Name: Jessica Todorovich for John Wiesman, DrPH, MPH

Title: Chief of Staff for Secretary of Health

Signature:



WAC 246-490-305 Establishing parentage with a voluntary acknowledgment of parentage or denial of parentage. (1) The individual who gave birth and an alleged genetic parent, an intended parent through assisted reproduction, or a presumed parent may use an acknowledgment of parentage that complies with RCW 26.26A.200 through 26.26A.265 to establish parentage. When the completed acknowledgment of parentage form is filed with the department and a denial of parentage is not required, the parent's name will be added to the child's birth record.

(2) If a presumed parent or an alleged genetic parent will not be the parent listed on the child's birth record, the presumed parent or an alleged genetic parent may sign a denial of parentage that complies with RCW 26.26A.200 through 26.26A.265. If the presumed parent or an alleged genetic parent does not sign a denial of parentage, the department shall require a court ordered establishment of parentage to change the birth record. Submission of the court order to the department must comply with the requirements of WAC 246-490-310.

(a) The acknowledgment of parentage and denial of parentage forms are considered completed when both forms are filed with the department.

(b) After both forms are filed, the department will change the child's birth record in accordance with the forms. The individual seeking to establish parentage will be listed as a parent.

(3) An individual who signed an acknowledgment of parentage or denial of parentage form may file a rescission of parentage form on or before sixty days from the time the acknowledgment or denial of parentage forms were filed with the department or the date of the first court proceeding relating to parentage of the child, whichever occurs first. Once a complete rescission that meets the time requirements has been filed with the department, the department will:

(a) Notify the individuals who signed an acknowledgment of parentage or denial of parentage form in writing to the individuals' address listed on the acknowledgment of parentage or denial of parentage form that a rescission was filed with the department. Failure to give the notice does not affect the validity of the rescission; and

(b) Change the child's record to the prior record information before the acknowledgment or denial of parentage form was filed.

(4) After a rescission is filed as described in subsection (3) of this section, a new acknowledgment of parentage form may be filed with the department.

(5) After sixty days, a challenge of parentage requires a court proceeding, consistent with chapter 26.26A RCW.

(6) For the purpose of this section, "witnessed" has the same meaning as RCW 26.26A.010. A person signing the witnessed statement must be at least eighteen years of age and not related by blood or marriage to the individuals who sign an acknowledgment of parentage, denial of parentage, or rescission of parentage form.

(7) An acknowledgment of parentage, denial of parentage, or rescission of parentage form must be completed, signed, witnessed or notarized, and submitted to the department with the applicable fee required by WAC 246-491-990. Incomplete forms will not be filed and will be returned.

(8) To receive a certification of birth ((certificate)) reflecting the change, a ((certificate)) certification order form must be

sent to the department along with the applicable fees required by RCW ((70.58.107)) 70.58A.560 and WAC 246-491-990.

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 246-490-055	Obtaining a birth certificate.
WAC 246-490-065	Notification when the record is not found.

AMENDATORY SECTION (Amending WSR 02-20-092, filed 10/1/02, effective 11/1/02)

WAC 246-491-010 Definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise:

(1) "Authorized representative" means a person permitted to receive a certification who is:

(a) Identified in a notarized statement signed by a qualified applicant; or

(b) An agency identified in a power of attorney as defined in chapter 11.125 RCW.

(2) "Board" means the state board of health.

((+2)) (3) "Certification" means the document, in either paper or electronic format, containing all or part of the information contained in the original vital records from which the document is derived, and is issued from the central vital records system. A certification includes an attestation by the state or local registrar to the accuracy of information, and has the full force and effect of the original vital record.

(4) "Department" means the department of health.

(5) "Informational copy" means a birth or death record issued from the central vital records system, containing all or part of the information contained in the original vital record from which the document is derived, and indicating it cannot be used for legal purposes on its face.

(6) "Legal guardian" means a person who serves as a guardian for the purpose of either legal or custodial matters, or both, relating to the person for whom the guardian is appointed. The term legal guardian includes, but is not limited to, guardians appointed pursuant to chapters 11.88 and 13.36 RCW.

(7) "Legal representative" means a licensed attorney representing either the subject of the record or qualified applicant.

(8) "Qualified applicant" means a person who is eligible to receive a certification of a vital record based on the standards established by chapter 70.58A RCW and this chapter.

(9) "Report" means an electronic or paper document containing information related to a vital life event for the purpose of registering the vital life event.

(10) "Vital life event" means a birth, death, fetal death, marriage, dissolution of marriage, dissolution of domestic partnership, declaration of invalidity of marriage, declaration of invalidity of domestic partnership, and legal separation.

(11) "Vital record" or "record" means a report of a vital life event that has been registered and supporting documentation.

(12) "Vital records system" means the statewide system created, operated, and maintained by the department.

AMENDATORY SECTION (Amending WSR 10-10-041, filed 4/27/10, effective 5/28/10)

WAC 246-491-039 Obtaining confidential information on ((state of Washington live)) birth and fetal death ((certificates under chapter

~~70.58 RCW~~) records. (1) The confidential sections of (~~the certificate of live~~) birth and (~~the certificate of~~) fetal death (~~are not subject to public inspection and may not be included on certified copies of the record~~) records shall not be released except upon order of a court ~~(7)~~ with jurisdiction over the department or as specified in subsection (2) of this section.

(2) (~~An individual who is the subject of the birth certificate may request the confidential information from that individual's birth certificate.~~

~~(a) All requests are to be made to the department on a form provided by the department.~~

~~(b) In order to obtain the confidential information:~~

~~(i) The individual and the subject of the birth certificate must be the same person.~~

~~(ii) The individual must have proof of identity as specified in (c) of this subsection.~~

~~(c) Proof of identity includes:~~

~~(i) A current document issued by a federal or state government with the individual's name, date of birth, photograph, signature, and physical description.)~~ The individual who is the subject of a birth record may request the confidential information as described in (c) of this subsection related to their own birth record if they comply with the following requirements:

(a) An individual must submit a request to the department on the required form and provide proper identity documentation as described in (b) of this subsection.

(b) Any person requesting confidential information contained in their own birth record must provide the department with valid proof of identity. For the purpose of this section, proof of identity means:

(i) A current and valid government issued identification that contains a photograph.

(ii) A legal record documenting any name change, if needed, to verify that the individual and the subject of the birth (~~certificate~~) record are the same person.

(iii) If the individual making the request is not applying in person, a notarized signature of the individual making the request must be included with the proof of identity.

~~((d))~~ (c) The department shall, upon receipt of a request (~~in compliance~~) that complies with (a) (~~through (e)~~) and (b) of this subsection to the satisfaction of the state registrar, provide ((e)) the individual with only the following items, ~~((as))~~ if available, from their birth (~~certificate~~) record:

(i) Newborn medical record number;

(ii) Birth weight;

(iii) Infant head circumference;

(iv) Obstetric estimate of gestation;

(v) Apgar scores;

(vi) Infant transferred within twenty-four hours of delivery;

(vii) Abnormal conditions of the newborn; and

(viii) Congenital anomalies of the newborn.

WAC 246-491-149 Information collected on the legal or public section of ((certificates; modifications to the United States standard certificates and report forms)) vital records. ((1) Effective January 1, 2003,) The department shall ((use the 2003 revisions of the United States standard forms for live birth and fetal death.

(2) Effective January 1, 2004, the department shall use the 2003 standard form for death.

(3) Effective January 1, 1992, the department shall use the 1988 revisions of the United States standard forms for marriage and certificate of divorce, dissolution of marriage or annulment.

(4) These forms are developed by the United States Department of Health and Human Services, National Center for Health Statistics. Copies of these forms may be obtained by contacting the department's center for vital statistics.

(5) With the exception of the confidential section, the department may modify any part of these forms.

(a) Table 3 identifies the modifications to the United States standard form for live birth.

(b) Table 4 identifies the modifications to the United States standard form for fetal death.

(c) Table 5 identifies the modifications to the United States standard form for death.

(d) Table 6 identifies modifications to the United States standard form for marriage.

(e) Table 7 identifies modifications to the United States standard form for certificate of divorce, dissolution of marriage, or annulment.

(6) Table 8 lists items to be collected on the certificate of dissolution of Washington state domestic partnership. This is a Washington state form not addressed in the United States standard forms.

(7) Modification to the United States standard form for marriage for parties who previously had a state-registered domestic partnership. Parties who previously had a state-registered domestic partnership and become married in Washington may obtain an amended marriage certificate from the state registrar that includes the legal date of marriage. Marriage certificates issued to parties who have a state-registered domestic partnership and who are deemed married under RCW 26.60.100 shall include the legal date of marriage of the parties. The legal date of marriage is defined in RCW 26.60.100(4) as the date of the original state-registered domestic partnership)) collect the following items on the legal or public section of reports for registration into the statewide vital records system in accordance with chapter 70.58A RCW and this section.

((U.S. STANDARD CERTIFICATE)) REPORT OF LIVE BIRTH

Table 3:

Legal or Public Birth ((Certificate)) Record Items

((Item Number))	Item Name	Difference from U.S. Standard, if any
((1))	Child's name	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((2))	Child's date of birth	
((3))	Time of birth	
((4))	Type of birthplace	Add "En route," Add "Planned birthplace if different"
((5))	Child's sex	
((6))	Name of facility	
((7))	City, town or location of birth	
((8))	County of birth	
((9))	((Mother's)) <u>Mother/Parent's name before first marriage</u>	
((10))	((Mother's)) <u>Mother/Parent's date of birth</u>	
((11))	((Mother's)) <u>Mother/Parent's birthplace</u>	
((12))	((Mother's)) <u>Mother/Parent's Social Security number</u>	
((13))	((Mother's)) <u>Mother/Parent's current legal last name</u>	
((14))	Social Security number requested for child?	
((16a))	((Mother's)) <u>Mother/Parent's residence - Number, street, and Apt. No.</u>	
((16b))	((Mother's)) <u>Mother/Parent's residence - City or town</u>	
((16c))	((Mother's)) <u>Mother/Parent's residence - County</u>	
((16d))	Tribal reservation name (if applicable)	Added
((16e))	((Mother's)) <u>Mother/Parent's residence - State or foreign country</u>	
((16f))	((Mother's)) <u>Mother/Parent's residence - Zip code + 4</u>	
((16g))	((Mother's)) <u>Mother/Parent's residence - Inside city limits?</u>	
((17))	Telephone number	Added
((18))	How long at current residence?	Added
((19))	((Mother's)) <u>Mother/Parent's mailing address, if different</u>	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((25))	((Father's)) <u>Father/Parent's</u> current legal name	
((26))	((Father's)) <u>Father/Parent's</u> date of birth	
((27))	((Father's)) <u>Father/Parent's</u> birthplace	
((28))	((Father's)) <u>Father/Parent's</u> Social Security number	
((66))	Certifier name and title	Delete check boxes
((67))	Date certified	
((68))	Attendant name and title	Delete check boxes
((69))	NPI of person delivering the baby	
((—))	Date filed by registrar	Deleted

((U.S. STANDARD)) REPORT OF FETAL DEATH

Table 4:
Legal or Public Fetal Death ((Certificate)) Record Items

((Item Number))	Item Name	Difference from U.S. Standard, if any
((1))	Name of fetus	
((2))	Sex	
((3))	Date of delivery	
((4))	Time of delivery	
((5))	Type of birthplace	Add "En route," Add "Planned birthplace if different"
((6))	Name of facility	
((7))	Facility ID (NPI)	
((8))	City, town or location of birth	
((9))	Zip code of delivery	
((10))	County of birth	
((11))	((Mother's)) <u>Mother/Parent's</u> name before first marriage	
((12))	((Mother's)) <u>Mother/Parent's</u> date of birth	
((13))	((Mother's)) <u>Mother/Parent's</u> current legal last name	
((14))	((Mother's)) <u>Mother/Parent's</u> birthplace	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((15a))	((Mother's)) <u>Mother/Parent's residence - Number, street, and Apt. No.</u>	
((15b))	((Mother's)) <u>Mother/Parent's residence - City or town</u>	
((15e))	((Mother's)) <u>Mother/Parent's residence - County</u>	
((15d))	Tribal reservation name (if applicable)	Added
((15e))	((Mother's)) <u>Mother/Parent's residence - State or foreign country</u>	
((15f))	((Mother's)) <u>Mother/Parent's residence - Zip code + 4</u>	
((15g))	((Mother's)) <u>Mother/Parent's residence - Inside city limits?</u>	
((16))	How long at current residence?	Added
((17))	((Father's)) <u>Father/Parent's current legal name</u>	
((18))	((Father's)) <u>Father/Parent's date of birth</u>	
((19))	((Father's)) <u>Father/Parent's birthplace</u>	
((20))	Name and title of person completing the report	
((21))	Date report completed	
((22))	Attendant name and title	Delete check boxes
((23))	NPI of person delivering the baby	
((24))	Method of disposition	
((25))	Date of disposition	
((26))	Place of disposition	Added
((27))	Location of disposition - City/town and state	Added
((28))	Name and complete address of funeral facility	Added
((29))	Funeral director signature	Added
((30))	Initiating cause/condition (cause of death)	
((31))	Other significant causes or conditions	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((32))	Estimated time of fetal death	
((33))	Was an autopsy performed?	
((34))	Was a histological placental examination performed?	
((35))	Were autopsy or histological placental examination results used in determining the cause of death?	
((36))	Registrar signature	Added
((37))	Date received	

(~~U.S. STANDARD CERTIFICATE~~) REPORT OF DEATH

Table 5:
Death ((Certificate)) Record Items

((Item Number))	Item Name	Difference from U.S. Standard, if any
((1))	Legal name (include a.k.a. if any)	
((2))	Death date	
((3))	Sex	<u>Add "X" as nonbinary option</u>
((4a))	Age - Years	
((4b))	Age - Under 1 year	
((4c))	Age - Under 1 day	
((5))	Social Security number	
((6))	County of death	
((7))	Birth date	
((8a))	Birth place - City, town or county	
((8b))	Birth place - State or foreign country	
((9))	Decedent's education	Add "Specify": next to box for "8th Grade or less"
((10))	Decedent's Hispanic origin	
((11))	Decedent's race	
((12))	Was decedent ever in U.S. Armed Forces?	
((13a))	Residence - Number and street	
((13b))	Residence - City or town	
((13c))	Residence - County	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((13d))	Tribal reservation name (if applicable)	Added
((13e))	Residence - State or foreign country	
((13f))	Residence - Zip code	
((13g))	Inside city limits?	
((14))	Estimated length of time at residence	Added
((15))	Marital status at time of death	
((16))	Surviving spouse's name	
((17))	Occupation	
((18))	Kind of business/ industry	
((19))	((Father's)) <u>Father/Parent's name</u>	
((20))	((Mother's)) <u>Mother/Parent's name before first marriage</u>	
((21))	Informant - Name	
((22))	Informant - Relationship to decedent	
((23))	Informant - Address	
((24))	Place of death	
((25))	Facility name (if not a facility, give number and street)	
((26a))	City, town, or location of death	
((26b))	State of death	
((27))	Zip code of death	
((28))	Method of disposition	
((29))	Place of disposition (name of cemetery, crematory, other place)	
((30))	Disposition - City/ town, and state	
((31))	Name and complete address of funeral facility	
((32))	Date of disposition	Added
((33))	Funeral director signature	
((34))	Causes of death and intervals between onset and death	
((35))	Other significant conditions contributing to death	
((36))	Autopsy?	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((37))	Were autopsy findings available to complete the cause of death?	
((38))	Manner of death	
((39))	Pregnancy status	
((40))	Did tobacco use contribute to death?	
((41))	Date of injury	
((42))	Hour of injury	
((43))	Place of injury	
((44))	Injury at work?	
((45))	Injury location - Street, city, county, state, zip	County Added
((46))	Describe how injury occurred	
((47))	Transport injury type	
((48a))	Certifying physician signature	
((48b))	Medical examiner/coroner signature	
((49))	Name and address of certifier	
((50))	Hour of death	
((51))	Name and title of attending physician if other than certifier	Added
((52))	Date certified	
((53))	Title of certifier	
((54))	License number of certifier	
((55))	ME/coroner file number	Added
((56))	Was case referred to medical examiner?	
((57))	County registrar signature	Added
((58))	County date received	Added
((59))	Record amendment	Added
((—	License number of funeral director	Deleted
—	Date pronounced dead	Deleted
—	Time pronounced dead	Deleted
—	Signature of person pronouncing death	Deleted
—	License number of person pronouncing death	Deleted
—	Date person pronouncing death signed	Deleted))

((U.S. STANDARD LICENSE AND CERTIFICATE)) REPORT OF
MARRIAGE

Table 6:
((Certificate)) Certification of
Marriage

((Item Number))	Item Name	Difference from U.S. Standard, if any
	Certificate name	Modified
((1))	County of license	Added
((2))	Date valid	
((3))	Not valid after (date)	
((4))	County auditor signature	
((5))	Date received (by county auditor)	
((6a))	Person A - Bride/groom/spouse	Added
((6b))	Legal name before marriage	Modified
((6c))	Birth name, if different	Added
((6d))	Sex ((-Male/female))	Added
((6e))	Current residence (street, city/town)	
((6f))	County of residence	
((6g))	State of residence	
((6h))	Date of birth	
((6i))	Birth state (if not USA, provide country)	
((6j))	((Mother/parent)) <u>Mother/Parent's birth name</u>	Modified
((6k))	((Father/parent)) <u>Father/Parent's birth name</u>	Modified
((6l))	((Mother/parent)) <u>Mother/Parent's birth state (or country)</u>	Modified
((6m))	((Father/parent)) <u>Father/Parent's birth state (or country)</u>	Modified
((7a))	Person B - Bride/groom/spouse	Added
((7b))	Legal name before marriage	
((7c))	Birth name, if different	Modified
((7d))	Sex ((-Male/female))	Added
((7e))	Current residence (street, city/town)	
((7f))	County of residence	
((7g))	State of residence	
((7h))	Date of birth	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((7i))	Birth state (if not USA, provide country)	
((7j))	((Mother/parent)) <u>Mother/Parent's birth name</u>	Modified
((7k))	((Father/parent)) <u>Father/Parent's birth name</u>	Modified
((7l))	((Mother/parent)) <u>Mother/Parent's birth state (or country)</u>	Modified
((7m))	((Father/parent)) <u>Father/Parent's birth state (or country)</u>	Modified
((8))	Date of marriage	
((9))	County of ceremony	
((10))	Type of ceremony	Added
((11))	Date signed (by officiant)	Added
((12))	Officiant's address	
((13))	Officiant's daytime phone	Added
((14))	Officiant's name	
((15))	Officiant's signature	
((16))	Witness signature	
((17))	Witness signature	
((18))	Person A signature	Modified
((19))	Date signed (by person A)	Added
((20))	Person B signature	Modified
((21))	Date signed (by person B)	Added
((22))	Person A - Social Security number	Added
((23))	Person A - Name	Added
((24))	Person B - Social Security number	Added
((25))	Person B - Name	Added
((26))	Person A signature - Declaration in absence of a Social Security number	Added
((27))	Person A date - Declaration in absence of a Social Security number	Added
((28))	Person B signature - Declaration in absence of a Social Security number	Added

((Item Number))	Item Name	Difference from U.S. Standard, if any
((29))	Person B date - Declaration in absence of a Social Security number	Added
	((Groom's) age last birthday	Deleted
	(Bride's) age last birthday	Deleted
	Signature of (license) issuing official	Deleted
	Title of (license) issuing official	Deleted
	Where married - City, town or location	Deleted
	Title (of officiant)	Deleted
	Confidential information	Deleted))

~~((U.S. STANDARD CERTIFICATE))~~ REPORT OF DIVORCE, DISSOLUTION OF MARRIAGE, OR ANNULMENT

**Table 7:
Certification of Dissolution, Declaration of Invalidity of Marriage, or Legal Separation**

((Item Number))	Item Name	Difference from U.S. Standard, if any
	Certificate name	Modified
((1))	Court file number	Added
((2))	Type of decree	
((3))	Date of decree	
((4))	County where decree filed	
((5))	Signature of superior court clerk	
((6a))	Spouse A - Name	Added
((6b))	Birth name, if different	Added
((6e))	Date of birth	
((6d))	Place of birth (state or country)	
((6e))	Residence - Street	Added
((6f))	Residence - City	
((6g))	Residence - County	
((6h))	Residence - State	
((7a))	Spouse B - Name	Added
((7b))	Birth name, if different	Modify
((7e))	Date of birth	
((7d))	Place of birth (state or country)	

((Item Number))	Item Name	Difference from U.S. Standard, if any
((7e))	Residence - Street	Added
((7f))	Residence - City	
((7g))	Residence - County	
((7h))	Residence - State	
((8))	Place of marriage - County	
((9))	Place of marriage - State	
((10))	Date of marriage	
((11))	Number of children born alive of this marriage	Added
((12))	Petitioner	
((13))	Name of petitioner's attorney or pro se	
((14))	Petitioner's attorney's address	
((15))	Spouse A Social Security number	Added
((16))	Spouse B Social Security number	Added
	((Date (decree) recorded	Deleted
	Number of children under 18 whose physical custody was awarded to (husband, wife, joint, other)	Deleted
	Number of children under 18 in household	Deleted
	Title of court	Deleted
	Title of certifying official	Deleted
	Date (certifying official) signed	Deleted
	Date couple last resided in same household	Deleted
	Confidential items	Deleted))

**Table 8:
Certification of Dissolution of
Washington State Domestic Partner-
ship**

((Item Number))	Item Name
	Certificate name
	Court file number
((1))	Type of decree
((2))	Date of decree
((3))	County where decree filed

((Item Number))	Item Name
((4))	Signature of superior court clerk
((5a))	First partner's name
((5b))	First partner's name at birth
((6))	First partner's date of birth
((7))	First partner's place of birth
((8))	First partner's residence - Street
((9))	First partner's residence - City
((10))	First partner's residence - Inside city limits
((11))	First partner's residence - County
((12))	First partner's residence - State
((13a))	Second partner's name
((13b))	Second partner's name at birth
((14))	Second partner's date of birth
((15))	Second partner's place of birth
((16))	Second partner's residence - Street
((17))	Second partner's residence - City
((18))	Second partner's residence - Inside city limits
((19))	Second partner's residence - County
((20))	Second partner's residence - State
((21))	Date of this partnership
((22))	Domestic partnership certificate number
((23))	Petitioner
((24))	Name of petitioner's attorney/pro se
((25))	Petitioner's address

NEW SECTION

WAC 246-491-159 Items on birth and death certifications and informational copies. Certifications and informational copies of birth and death records issued from the state vital records system must contain only items in accordance with this section.

(1) Unless the items are not available or were not collected at the time of birth registration, certifications of birth, certifications of delayed birth, and informational copies of birth and delayed births will display only the following items:

Vital Record Item	Certification of Birth and Informational Birth Copy	Certification of Delayed Birth and Informational Delayed Birth Copy
State file number	Yes	Yes
Date certificate issued	Yes	Yes
First and middle name(s) of subject of the record	Yes	Yes
Last name(s) of subject of the record	Yes	Yes
Date of birth of subject of the record	Yes	Yes
Facility born	Yes	Yes
Place of birth (city, county, state)	Yes	Yes

Vital Record Item	Certification of Birth and Informational Birth Copy	Certification of Delayed Birth and Informational Delayed Birth Copy
Time of birth	Yes	Yes
Sex	Yes	Yes
Mother/parent's name prior to first marriage	Yes	Yes
Mother/parent's place of birth	Yes	Yes
Mother/parent's date of birth or age at the time of child's birth	Yes	Yes
Father/parent's current legal name	Yes	Yes
Father/parent's place of birth	Yes	Yes
Father/parent's date of birth or age at the time of child's birth	Yes	Yes
Evidence required by RCW 70.58A.120, 70.58A.130, and WAC 246-490-081	No	Yes
Date record filed	Yes	Yes
Fee number	Yes	Yes
Signature of applicant	No	Yes

(2) (a) For deaths registered starting January 1, 2018, long form certifications of death, short form certifications of death, and informational copies of death will display only the following items:

Vital Record Item	Long Form Certification of Death	Short Form Certification of Death	Informational Copy of Death
State file number	Yes	Yes	Yes
Date certificate issued	Yes	Yes	Yes
Fee number	Yes	Yes	Yes
Decedent's legal first and middle name(s)	Yes	Yes	Yes
Decedent's last name(s)	Yes	Yes	Yes
County of death	Yes	Yes	Yes
Date of death	Yes	Yes	Yes
Hour of death	Yes	Yes	Yes
Sex	Yes	Yes	Yes
Age	Yes	Yes	Yes
Social Security number	Yes	No	No
Place of death	Yes	Yes	Yes
Facility or address of death	Yes	Yes	Yes
City, state, zip	Yes	Yes	Yes
Hispanic origin	Yes	Yes	Yes
Race	Yes	Yes	Yes
Residence street	Yes	Yes	Yes
Residence city, state, zip	Yes	Yes	Yes
Residence county	Yes	Yes	Yes
Is residence inside city limits?	Yes	Yes	Yes
Tribal reservation	Yes	Yes	Yes
Length of time at residence	Yes	Yes	Yes
Birth date	Yes	Yes	Yes
Birthplace	Yes	Yes	Yes
Father/parent name	Yes	Yes	Yes

Vital Record Item	Long Form Certification of Death	Short Form Certification of Death	Informational Copy of Death
Mother/parent name	Yes	Yes	Yes
Marital status	Yes	Yes	Yes
Spouse	Yes	Yes	Yes
Method of disposition of remains	Yes	Yes	Yes
Place of disposition of remains	Yes	Yes	Yes
City, state of disposition of remains	Yes	Yes	Yes
Disposition date of remains	Yes	Yes	Yes
Occupation	Yes	Yes	Yes
Industry	Yes	Yes	Yes
Education	Yes	Yes	Yes
U.S. Armed Forces	Yes	Yes	Yes
Informant name	Yes	Yes	Yes
Informant's relationship to decedent	Yes	Yes	Yes
Informant's address	Yes	Yes	Yes
Funeral facility	Yes	Yes	Yes
Funeral facility address	Yes	Yes	Yes
Funeral facility city, state, zip	Yes	Yes	Yes
Funeral director name	Yes	Yes	Yes
Cause of death (A, B, C, and D)	Yes	No	No
Other conditions contributing to death	Yes	No	No
Date of injury	Yes	No	No
Hour of injury	Yes	No	No
Injury at work	Yes	No	No
Place of injury	Yes	No	No
Location of injury	Yes	No	No
City, state, zip of injury	Yes	No	No
County of injury	Yes	No	No
Describe how the injury occurred	Yes	No	No
If transportation injury, specify	Yes	No	No
Manner of death	Yes	No	No
Autopsy	Yes	No	No
Were autopsy findings available to complete cause of death?	Yes	No	No
Did tobacco use contribute to death?	Yes	No	No
Pregnancy status if female	Yes	No	No
Certifier name	Yes	No	No
Certifier title	Yes	No	No
Certifier address	Yes	No	No
Certifier city, state, zip	Yes	No	No
Date signed by certifier	Yes	No	No
Case referred to ME/coroner?	Yes	No	No
File number	Yes	No	No
Attending physician	Yes	No	No
Local deputy registrar	Yes	Yes	Yes
Date received by local deputy registrar	Yes	Yes	Yes

(b) For deaths registered before January 1, 2018, long form certifications of death will contain only the vital record items as indicated for long form certification in (a) of this subsection if such vital record items are available or were collected at the time of death registration.

(c) For deaths registered before January 1, 2018, informational copies of death will contain only the vital record items as indicated for informational death copy in (a) of this subsection if such vital record items are available or were collected at the time of death registration.

(d) The short form certification of death is not available for deaths registered before January 1, 2018.

(3) Certification of fetal death will display only the following items:

Vital Record Item
Local file number
State file number
Name of fetus (first, middle, last, suffix)
Sex
Date of delivery
Time of delivery
Type of birthplace
Planned birthplace, if different
Name of facility
Facility I.D.
City, town, or location of delivery
Zip code of delivery
County of delivery
Mother's name before first marriage (first, middle, last)
Mother's date of birth
Mother's current legal last name, if different
Mother's birthplace (state, territory, or foreign country)
Mother's residence - Number and street
Mother's residence - Apt no.
Mother's residence - City or town
Mother's residence - County
If you live on tribal reservation, give name
State or foreign country
Zip code +4
Mother's residence inside city limits
How long at current residence?
Name and title of person completing cause of death
Signature of person completing cause of death
Date signed by person completing cause of death
Name and title of person delivering the fetus
NPI of person delivering the fetus
Method of disposition
Date of disposition
Place of disposition

Vital Record Item
Disposition location - City/town, and state
Name and complete address of funeral facility
Funeral director signature
Initiating cause/condition
Other significant causes or conditions
Estimated time of fetal death
Was an autopsy performed?
Was a histological placental examination performed?
Registrar signature
Date received by local registrar

NEW SECTION

WAC 246-491-300 Requirements for ordering certifications of birth, death, and fetal death. (1) For certifications of birth, death, and fetal death, the state or local registrar shall release certifications only to qualified applicants as permitted by chapter 70.58A RCW.

(2) For each application, the qualified applicant must submit all of the following:

(a) Information to correctly identify the record consistent with the requirements of WAC 246-491-310;

(b) Identity documentation consistent with the requirements of WAC 246-491-320;

(c) Evidence of eligibility consistent with the requirements of WAC 246-491-330; and

(d) Fees required by RCW 70.58A.560 and WAC 246-491-990, or evidence that the qualified applicant is eligible to receive certifications of a vital record at no charge as required by WAC 246-491-350.

(3) All identity documentation and evidence of eligibility documentation submitted to the state or local registrar from the applicant must originate from a source which the state or local registrar can reasonably verify the authenticity of the documentation.

(4) The applicant must submit all required information and documentation to the state or local registrar within thirty days of the state or local registrar requesting additional information. After thirty days, the application is considered denied.

(5) When the applicant cannot submit the required information or documentation, the applicant will be given an opportunity through an exception process to explain the circumstances to the state or local registrar. If the circumstances presented would have prevented the applicant from providing items required by this section, the state or local registrar may grant an exception and issue the record.

(6) The state or local registrar may deny an application if the applicant fails to meet the requirements of this section or chapter 70.58A RCW. If the state registrar denies an application for failing to meet the requirements, the applicant may appeal the decision by requesting a brief adjudicative proceeding pursuant to WAC 246-10-501 through 246-10-505, and RCW 70.58A.550.

(7) For the purpose of this section:

(a) "Application" means a documented request for certifications of birth, death, and fetal death, including short form certifications of death where applicable.

(b) "Birth" includes delayed birth.

NEW SECTION

WAC 246-491-310 Information required to order certifications of birth, death, and fetal death. (1) A qualified applicant requesting a certification of birth must submit the following information as it appears on the birth record on a form provided by the state or local registrar:

- (a) First, middle, and last name of the subject of the record;
- (b) First and last name of all parents listed on the record;
- (c) Date of birth; and
- (d) City or county where the birth occurred.

(2) A qualified applicant requesting a certification of death must submit the following information on a form provided by the state or local registrar:

(a) First and last name of the decedent as it appears on the record;

- (b) Approximate date of death; and
- (c) City or county where the death occurred.

(3) For the purpose of this section:

- (a) "Birth" includes delayed birth.
- (b) "Death" includes fetal death.

NEW SECTION

WAC 246-491-320 Identity documentation required to obtain certifications of birth, death, and fetal death. (1) The qualified applicant must submit identity documentation to the state or local registrar to receive a certification of birth, death, or fetal death in accordance with this section.

(2)(a) The qualified applicant must submit to the state or local registrar one of the following pieces of identity documentation, valid or expired no more than sixty days that contains the applicant's full name, photograph, and date of birth:

(i) Enhanced driver's license, driver's license, or instruction permit issued by a state or territory of the United States, or the District of Columbia;

(ii) A Washington state identification card or an identification card issued by another state;

(iii) A military identification card;

(iv) A United States passport or passport card; or

(v) An identification document issued by local, state, federal, or foreign government, or federally recognized Indian tribe.

(b) A qualified applicant requesting on behalf of a government agency or courts to conduct official duties may use an identification card issued by their government agency or courts that contains the full name and photograph of the applicant.

(3) If a qualified applicant is unable to submit one identity documentation listed in subsection (2) of this section, they must provide at least two alternate forms of identification. Alternate forms of identification may include, but are not limited to, government issued identifications listed in subsection (2)(a) of this section if expired more than sixty days, letters from government or social agencies, pay statements, utility bills, student identification with photo, or other items acceptable to the state registrar. Alternate forms of identification must at least contain matching first and last names and addresses, or provide the full name, photograph, and date of birth.

(4) For applications received by telephone or internet, the qualified applicant may choose to take an authentication quiz in lieu of submitting identity documents. The authentication quiz must contain or ask information requiring personal knowledge not available from reviewing current information typically found in their wallet or personal possession. If the authentication quiz is not successfully completed, the applicant must submit identity documentation listed in subsection (1) or (2) of this section.

(5) Proof of citizenship is not required information to receive a certification of birth, death, or fetal death.

(6) For the purpose of this section, "birth" includes delayed birth.

NEW SECTION

WAC 246-491-330 Evidence of eligibility. (1) The qualified applicant must submit evidence of eligibility documents to the state or local registrar to prove they are eligible to receive a certification of birth, death, or fetal death.

(2) If the qualified applicant is listed as a party on the record, and their identity documentation provided in WAC 246-491-320 sufficiently links the applicant to the record, then evidence of eligibility is met.

(3) If the qualified applicant is not listed as a party on the record or the identity documentation does not sufficiently link the qualified applicant to the record, the following documentation may serve as evidence of eligibility:

(a) Copies of vital records such as certifications of birth, death, marriage, and divorce from this or another jurisdiction that link the applicant to the requested record;

(b) Copies of certified court orders from a court of competent jurisdiction linking the applicant to the record;

(c) Document or letter from title insurer or title insurance agent handling a transaction on behalf of the decedent;

(d) Document or letter from a government agency or courts stating the certification will be used in the conduct of official duties; or

(e) Other documents that link the applicant to the record as determined by the state registrar.

(4) For the purpose of this section, "birth" includes delayed birth.

NEW SECTION

WAC 246-491-340 Requirements for ordering certifications of marriage, dissolution of marriage, and dissolution of domestic partnership. (1) To receive a certification of marriage, dissolution of marriage, or dissolution of domestic partnership, the applicant must submit to the state registrar:

(a) Information to correctly identify the record requested consistent with the requirements of (c) of this subsection;

(b) Fees required by RCW 70.58A.560 and WAC 246-491-990; and

(c) The following information on a form provided by the state registrar:

(i) First and last name of one of the parties on the record;

(ii) Approximate date the event occurred; and

(iii) City or county where the event was filed.

(2) The state registrar may require the first and last name of the second party on the record to ensure the correct record was located.

NEW SECTION

WAC 246-491-350 Requirements for certifications of vital records at no charge. (1) Qualified applicants requesting a certification at no charge per RCW 70.58A.560 (2) and (3) must provide identity documentation, eligibility documentation, and required information to the state or local registrar in accordance with RCW 70.58A.530 and this chapter, in addition to the requirements of this section.

(2) To qualify for a certification of death at no charge per RCW 70.58A.560(2):

(a) A law enforcement agency must submit a letter on official letterhead to the state or local registrar stating the certification will be used to maintain a registered sex offender database; or

(b) A county clerk or court in the state must submit a letter on official letterhead to the state or local registrar stating the certification will be used to extinguish an offender's legal financial obligation.

(3) To qualify for a certification at no charge pending a veterans administration claim per RCW 70.58A.560 (2)(a), the state or local registrar must receive:

(a) A letter on official letterhead from the veterans administration stating the certification will be used in connection with a claim for compensation or pension;

(b) A letter on official letterhead from the veterans administration stating an agency is working on behalf of the veterans administration, authorized to represent the veteran, provides the claim type currently pending before the veterans administration, and identifies the type of certification needed;

(c) A letter on official letterhead from the veterans administration stating there is currently a claim pending before the veterans administration, identifies the type of certification needed, and is submitted by a spouse or dependent of the eligible veteran; or

(d) A letter on official letterhead from the veterans administration stating the decedent is eligible for veterans administration bur-

ial benefits or approved to be buried in a national cemetery and is submitted by a funeral home or director.

(4) To qualify for a certification of birth at no charge for a homeless person living in state per RCW 70.58A.560(3), a government agency or homeless services provider working on behalf of the homeless individual must submit a letter on official letterhead to the state registrar asserting the individual meets the definition of homeless and lives in the state.

NEW SECTION

WAC 246-491-360 Requirements for ordering informational copies of birth and death records. (1) To receive an informational copy of a birth or death record, the applicant must submit to the state or local registrar:

(a) Information to correctly identify the record on a form provided by the state or local registrar consistent with the requirements of (c) or (d) of this subsection; and

(b) Fees required by RCW 70.58A.560 and WAC 246-491-990;

(c) For an informational copy of a birth record, the following information as it appears on the record:

(i) First, middle, and last name of the subject of the record;

(ii) First and last name of all parents listed on the record;

(iii) Date of birth; and

(iv) City or county where the birth occurred.

(d) For an informational copy of a death record, the following information:

(i) First and last name of the decedent;

(ii) Approximate date of death; and

(iii) City or county where the death occurred.

(2) For the purpose of this section, "birth" includes delayed birth.

NEW SECTION

WAC 246-491-370 Notification of no record. (1) The applicant will receive a written notice of no record found if the state or local registrar cannot find a record based on information provided by the applicant. The application request will be considered closed after the written notice is sent. Following such notice, the applicant may do any of the following:

(a) Submit a new application providing different information and pay the fees required by RCW 70.58A.560 and WAC 246-491-990 on this new application; or

(b) If requesting a certification of birth, begin the process to obtain a delayed registration of live birth pursuant to RCW 70.58A.120 and WAC 246-490-080.

(2) Written notification by the state registrar of no record found does not constitute a denial or withholding of a request for the purpose of RCW 70.58A.550.

WAC 246-491-990 Vital records fees. (1) The department shall collect nonrefundable fees to cover program costs as follows:

((1)) To prepare a sealed record following an adoption or to search the vital records system for adoption record information.	\$15.00
((2)) To file an assertion of parentage, an acknowledgment or denial of parentage, or a rescission of parentage.	\$18.00
((3)) Fee for hospital filed acknowledgments or denials of parentage.	\$5.00
((4)) To prepare a certificate of birth record information (CBRI) letter or to provide a copy of an assertion of parentage, an acknowledgment or denial of parentage, or a rescission of parentage.	\$15.00
<u>Priority processing fee for applications of certifications and informational copies received by telephone or internet.</u>	<u>\$7.00</u>
<u>Priority processing fee for applications of certifications and informational copies received in-person.</u>	<u>\$13.50</u>

~~((5))~~ (2) The secretary of health may enter into agreements with state and local government agencies to establish alternate fee schedules and payment arrangements for reimbursement of these program costs.

(3) The fee for each electronic verification of a vital event through the electronic verification of vital events system must be in accordance with the national pricing model.

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 246-491-001 Purpose.