



**TENNESSEE DEPARTMENT OF HEALTH
OFFICE OF VITAL RECORDS
NOTIFICATION OF ORDER OF PARENTAGE AND APPLICATION
FOR A NEW BIRTH CERTIFICATE
Tennessee Code Annotated Sections 36-2-313 and 68-3-310**

Name of Court _____ Today's Date _____
 County of _____ City of _____ State of _____
 Docket Number _____ Date of Decree _____

SECTION I INFORMATION CONCERNING CHILD

Name of Child Prior to Court Order _____
 Social Security Number _____ Date of Birth _____
 Place of Birth _____ Sex _____
CITY COUNTY STATE

SECTION II INFORMATION FOR NEW CERTIFICATE OF BIRTH

Name of Child _____
 As Determined by Court First Middle Last

FATHER OF CHILD

Full Name _____
 Date of Birth _____
 Birthplace _____
STATE OR FOREIGN COUNTRY
 Residential Address _____
City State Zip Code
 Mailing Address (if different) _____
 Home Telephone Number _____
 Social Security Number _____
 Driver's License Number _____
 Employer _____
 Employer's Address _____
 Employer's Telephone Number _____
 Health Insurance _____
 Policy Number _____

MOTHER OF CHILD

Full Legal Name _____
 Full Maiden Name _____
 Date of Birth _____
 Residential Address _____
City State Zip Code
 Mailing Address (if different) _____
 Home Telephone Number _____
 Social Security Number _____
 Driver's License Number _____
 Employer _____
 Employer's Address _____
 Employer's Telephone Number _____
 Health Insurance _____
 Policy Number _____

INSTRUCTIONS

1. A new certificate of birth will be prepared in accordance with the law upon the completion and submission of this form and a certified copy of the court's order of parentage.
2. Enclose the \$30.00 fee required for preparation and issuance of a new birth certificate. Make check payable to Tennessee Vital Records.
3. Mail to: **Tennessee Vital Records
 Andrew Johnson Tower, 1st Floor
 710 James Robertson Parkway
 Nashville, TN 37243**