

## DENIAL OF PARENTAGE

THIS IS A LEGAL DOCUMENT. READ THE INSTRUCTIONS CAREFULLY ON PAGES 3 & 4.

### Information as it Appears on the Child's Birth Certificate

1. Child's First Name	2. Middle Name	3. Last Name
4. Date of Birth (MM/DD/YYYY)	5. City or County of Birth	
6. Place of Birth- Name of hospital or location where child was born	7. Birth Parent/Mother's First, Middle, Last Name	

### Presumed or Alleged Genetic Parent's Information

The signatory must sign this denial in the presence of either a notarial officer OR witness, not both. All fields are required, except for the notarial appointment expiration date when signed by a third party witness.

**Statement of Denial:** I understand this legal document is used to be discharged of all the rights and duties as a parent for the child listed above. This form must be completed and submitted to the Department of Health, Center for Health Statistics with a completed Acknowledgment of Parentage (AOP) form signed by the birth parent and individual seeking to establish parentage. The filing of both forms will remove the presumed parent or alleged genetic parent listed below, and add the parent listed on a valid Acknowledgment of Parentage.

***I, the presumed or alleged genetic parent, declare under penalty of perjury under the laws of the state of Washington that I have been provided with and understand the rights and responsibilities, as written on the back of this form, and that the information I have provided is true and correct.***

8. Full Name	9. Telephone (        )	10. Email	
11. Address	12. City	13. State	14. Zip

Presumed or alleged genetic parent's signature \_\_\_\_\_

Signed and sworn before me on \_\_\_\_\_ by \_\_\_\_\_  
Date (MM/DD/YY)      Print Full Name of Presumed or Alleged Genetic Party

State of \_\_\_\_\_, County of \_\_\_\_\_

*Place notary  
seal here*

\_\_\_\_\_  
Signature of Witness or Notarial Officer      Title of Office

\_\_\_\_\_  
Printed Full Name of Witness or Notarial Officer      Notary Use Only

## STATEMENTS OF DENIAL

By signing this form, you declare under penalty of perjury under the laws of Washington State that you understand the following:

- The Denial of Parentage (DOP) is a legally binding form. The legal basis for this form are chapters 26.26A and 26.26B of the Revised Code of Washington (RCW).
- This form is voluntary and does not require a court proceeding. Alternatively, you may choose to determine parentage through state or tribal court.
- You have the right to talk with an attorney before signing this form. If you do not understand this information or have further questions, you should talk to an attorney.
- Once a DOP is filed, in conjunction with a valid Acknowledgment of Parentage (AOP) form, it is the equivalent to an adjudication of non-parentage of a presumed parent or an alleged genetic parent. This person is thus discharged from all rights and duties of a parent.
- You have not been acknowledged or adjudicated as the parent of the child listed on the form.
- If you are not sure that you are the parent of the child and the child resides in Washington State, you may open a child support case with the Division of Child Support (DCS). In most cases, you will be required to submit to genetic tests to decide parentage. The genetic parent may be responsible for the costs of the test. To locate the DCS office nearest to you, call **1-800-442-5437**. You can find additional information about parentage establishment in the booklet entitled “Establish Parentage for Your Child’s Sake.” It is available at hospitals, birthing centers, and DCS offices (RCW 26.26A.300 through 26.26A.515).
- Any individual who signed an AOP or Denial of Parentage (DOP) may change their mind and rescind (which means to revoke or cancel). To rescind, a Rescission of Parentage form must be filed with the Department of Health, Center for Health Statistics within a maximum of **60 days** after an AOP or DOP form is filed **or** before the first court proceeding, which ever happens first (RCW 26.26A.235).
- A challenge to either an AOP or a DOP after the period for rescission has passed is permitted only for limited reasons including fraud, duress, or factual mistake. It must be brought to Superior Court and the challenger has the burden of proof. A challenge must be brought within 4 years from the date the AOP is filed with the Department of Health, Center for Health Statistics (RCW 26.26A.235 through 26.26A.245).
- Only a court may determine custody and visitation issues for the child. Either parent may ask Superior Court to make residential provisions or a parenting plan after the 60-day rescission period has elapsed. The court may require the parent to pay costs (RCW 26.26A.400 through 26.26A.515).
- For the purpose of this form, “witnessed” means at least one individual who is authorized to sign has signed a record to verify that the individual personally observed a signatory sign the record (RCW 26.26A.010(23)). A person signing the witnessed statement must be at least 18 years of age and not related by blood or marriage to the individuals who sign a voluntary acknowledgment of parentage, denial of parentage, or rescission of parentage form.
- “Notarial officer” means a notary public or other individual authorized to perform a notarial act (RCW 42.42.010(9)).

## INSTRUCTIONS FOR DENIAL OF PARENTAGE FORM

A presumed or an alleged genetic parent should carefully read all instructions before completing and signing the Denial of Parentage (DOP). The DOP must be either notarized or witnessed, not both, to be filed with the Department of Health, Center for Health Statistics. **We cannot file forms with missing information and will return the forms to the person denying parentage.**

### Instructions for completing the DOP:

- The person denying parentage must sign page 1 in the presence of a notary or witness.
- The witness or notary must sign, print their name, and date on page 1.
- Submit completed DOP with a **non-refundable \$18** check or money order payable to DOH.
- Send all forms and payments to:

Department of Health  
Center for Health Statistics  
PO Box 9709  
Olympia, WA 98507

**What is a DOP?** When filed with an Acknowledgment of Parentage (AOP) form, a DOP is a legal form that allows the person denying parentage to not be listed on the birth certificate. They are discharged from all rights and duties as a parent.

**When can a DOP be used?** A DOP can only be used if:

- Everyone agrees, and
- Parentage has not been decided by a court.

### Who Can Sign a DOP?

- The spouse or ex-spouse who is currently married or was married to the mother/birth parent at any time during the pregnancy and will not be the parent listed on the child's birth certificate.
- A person who is genetically related to the child and is revoking their right to be a parent listed on the child's birth certificate.
- The second parent currently listed on the child's birth certificate. An Acknowledgment of Parentage form must be submitted to replace the second parent being removed.

The AOP and DOP may be filed separately or at the same time, but neither is valid unless both are filed with the Department of Health, Center for Health Statistics. If you choose to send the forms together, only one non-refundable filing fee of \$18 is required. Otherwise, two non-refundable \$18 filing fees are required.

**Do I need a notary or a witness?** Yes. The person denying parentage must sign the DOP in front of either a notary **OR** a witness. The notary or witness must also complete the signature block. Common notary locations include hospitals, local banks, title companies, and attorneys/county clerks. A person signing the witnessed statement must be at least 18 years of age and not related by blood or marriage to the individual who signs a DOP form. The local child support offices will serve as witnesses. Center for Health Statistics staff will not serve as witnesses.

**When is an Acknowledgment of Parentage (AOP) required?** To be valid, the birth parent and person wanting to be listed as the second parent must also sign an AOP form. The AOP and DOP may be filed separately or at the same time, but neither is valid unless both are filed with the Department of Health, Center for Health Statistics.

## Definitions

- “Alleged genetic parent” means an individual who is alleged to be, or alleges that the individual is, a genetic parent or possible genetic parent of a child whose parentage has not been adjudicated. The term includes an alleged genetic father and alleged genetic mother (RCW 26.26A.010(3)).
- “Presumed parent” means an individual who is presumed to be a parent of a child, unless the presumption is overcome in a judicial proceeding, a valid denial of parentage, or a court adjudicates the individual to be a parent (RCW 26.26A.010(17)). A person is presumed to be the parent of the child if:
  - The individual and birth parent were married to or in a state registered domestic partnership with each other and the child was born during the marriage or partnership; or
  - The individual and birth parent were married or in a state registered domestic partnership with each other and the child is born within 300 days after the marriage is terminated by death, annulment, divorce, dissolution or declaration of invalidity; or
  - The individual and birth parent were married or entered into a state registered domestic partnership with each other after the birth of the child and filed an assertion with the Department of Health; or
  - The individual and birth parent were married or entered into a state registered domestic partnership with each other after the birth of the child and agreed to be named as a parent of the child on the birth certificate; or
  - The individual seeking to establish parentage resided in the same household with the child for the first four years of life of the child, including any period of temporary absence, and openly held out the child as the individual’s child (RCW 26.26A.115).
- “Witnessed” means at least one individual who is authorized to sign has signed a record to verify that the individual personally observed a signatory sign the record (RCW 26.26A.010(23)). A person signing the witnessed statement must be at least 18 years of age and not related by blood or marriage to the individuals who sign a voluntary acknowledgment of parentage, denial of parentage, or rescission of parentage form
- “Notarial officer” means a notary public or other individual authorized to perform a notarial act (RCW 42.42.010(9)).

**If you need help understanding your rights and responsibilities as parents and the alternatives to, and consequences of, signing this form, call the Division of Child Support at 1-800-442-5437.**