APPLICATION FOR A <u>NON-GENEALOGICAL</u> CERTIFICATION OR CERTIFIED COPY OF A VITAL RECORD

New Jersey Department of Health Vital Statistics and Registry P.O. Box 370 - Trenton, NJ 08625-0370

Click here to complete an application online, or visit: http://www.nj.gov/health/vital/

☐ Certified Copy		Requestor's Relationship to Person on Record	Requestor's Signature	
Certified Copy for ar	Apostille Seal	(proof is required for certified copy)		
☐ Certification			Date (of request) / /	
Name of Requestor	110000000000000000000000000000000000000	to produce the control of the contro	Reasons for Request	
First	A A i al al la		Passport	
(1)	Middle		Driver's License	
Last			School / Sports	
Current Mailing Address	s (must match address on ID)		☐ Veterans' Benefits ☐ Social Security Card / Benefits	
Street			Medicare	
City	State	Zip Code	Welfare / Disability Other:	
Email Address		Daytime Phone Number	other.	
	@ .	() -		
BIRTH				
Child's Name at Birth	First	Middle	Last	
No. Requested Copies	Place of Birth		County Date of Birth	
	City	State	/ /	
Name of Child's Parents	(name given at birth or on bir	rth certificate / Maiden Name)		
Parent A First		Middle	Last	
Parent B First		Middle	Last	
If Child's name was cha	nged:			
New Name		Describe Change:		
MARRIAGE			DOMESTIC DARTNERSHIP	
IVIAKKIAGE		CIVIL UNION	DOMESTIC PARTNERSHIP	
No. Requested Copies	Place of Event	CIVIL UNION	County Date of Event	
		State		
	Place of Event City	State		
No. Requested Copies	Place of Event City	State		
No. Requested Copies Name of Spouses (name of	Place of Event City	State icate / Maiden Name)	County Date of Event	
No. Requested Copies Name of Spouses (name of Spouse A First	Place of Event City	State icate / Maiden Name) Middle	County Date of Event / /	
No. Requested Copies Name of Spouses (name of Spouse A First Spouse B First	Place of Event City	State icate / Maiden Name) Middle	County Date of Event / /	
No. Requested Copies Name of Spouses (name of Spouse A First Spouse B First DEATH	Place of Event City given at birth or on birth certifi	State icate / Maiden Name) Middle Middle	County Date of Event / / Last Last	
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