NEW YORK STATE DEPARTMENT OF HEALTH Vital Records Section

Application to Town/City Clerk for Copy of Marriage Record

TYPE OF	RECORD DESIRE	D (Enter Numbe	r of Copie	s)	
Search and Certified Transcript	Fee \$10.00 per copy	Search and Certified Copy			Fee \$10.00 per copy
A Certified Transcript is an abstract from the marriage record issued under the seal of the town/city clerk. It includes the names of the contracting parties, their residence at the time the license was issued, date and place of marriage as well		A Certified Copy includes all of the items of information occurring on the original record of the marriage.			
residence at the time the license was issued, date a as date and place of birth of the bride and groom.	A Certified Copy may be needed where proof of parentage and certain other detailed information may be required such as: passports, veteran's benefits,				
A Certified Transcript may be used as proof that a n	narriage occurred.	court proceedings, or set	tlement of an esta	ate.	
Bride/Groom/Spouse					
Name (as recorded on marriage license):					Date of Birth: (or age at time of marriage)
First Middle	Last		Birth Name (if diff		of marriago):
If Previously Married, State Name Used at that	Time:		Residence (at time t	of marriage):
First Middlø	Last			County	State
Bride/Groom/Spouse					
Name (as recorded on marriage license):		5356	104003 23333 2467947 _ 1798		Date of Birth: (or age at time of marriage)
First Middle	Last		Birth Name (if diff		
If Previously Married, State Name Used at that	t Time:		Residence	(at time	of marriage):
First Middle	Last			County	State
Marriage Information					
Place Where Marriage License Was Issued:	Place Where Marriage V	Nas Performed: Marriage Certificat (if known)		cate No.	: Local Registration No. (if known)
Town or City County	Town or City	County			De int
Purpose for which record is required:					
In what capacity are you acting?:	What is your relationship to person whose record is required? (If self, state "SELF".)				
If attorney, give name and relationship of your	client to person whose reco	ord is required:	eve Titp Like	(IT Search	ing penoa) (mm / aa / yyyy)
Signature of Applicant	Date:	Applicant's Phone Nu	mber:		
		Please print name an	d addraga whore	rooord	is to be sent:
Name of Applicant:		Please print name an	a address where	e recoru	is to be sent.
Address of Applicant:			1009 1920 2009 1920 2009 1920		
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City	State ZIP	- City			State ZIP
		-			

Where to Apply for Record of Marriage

1. License Issued in New York State (Outside of New York City)

Year of Marriage	Apply to:		
* 1881 to present (\$10.00 per copy)	Town or City Clerk Where license was issued (purchased)		
* 1881 to present (\$30.00 per copy) If a state issued copy is required or you are not certain in which city or town outside of New York City the license was issued.	New York State Department of Health Vital Records Certification Unit P.O. Box 2602 Albany, NY 12220-2602 www.health.ny.gov/vital_records/marriage.htm		
* 1880 - 1907 and license issued in the cities of Albany, Buffalo or Yonkers.	Albany:	City Clerk City Hall - 24 Eagle St Rm 202 Albany, NY 12207	
	Buffalo:	City Clerk 65 Niagara Square Buffalo, NY 14202	
	Yonkers:	City Clerk 40 S Broadway Rm 107 Yonkers, NY 10701	

2. License Issued in New York City

Contact the office of the New York City Clerk for information if the marriage license was issued in any of the five boroughs of New York City:

www.cityclerk.nyc.gov

Manhattan	City Clerk of New York 141 Worth Street New York, NY 10013
	(212) NEW-YORK / (212) 639-9675
Brooklyn Bronx Queens Richmond	(also known as Kings)
	(Records prior to 1898 are on file with the New York State Department of Health) (also known as Staten Island) (Records prior to 1898 are on file with the New York State Department of Health)
PLEASE NOTE:	Records of marriages in areas of the present City of New York, which were not part of the city at the time of marriage, are on file with the State Department of Health.