



**BOROUGH OF TENAFLY  
HEALTH DEPARTMENT  
100 RIVEREDGE ROAD  
TENAFLY, NJ 07670**

**APPLICATION FOR A NON-GENEALOGICAL CERTIFICATION OR CERTIFIED COPY OF A VITAL RECORD  
APLICACIÓN PARA COPIAS CERTIFICADAS Ó CERTIFICACIONES DE REGISTROS CIVILES NO-ANCESTRO**

<input type="checkbox"/> I would like a <b>Certified Copy</b> . (Quiero una copia certificada.) <input type="checkbox"/> I would like a <b>Certification</b> . (Quiero una certificación.) Documents in need of an <b>Apostille Seal</b> must be obtained from the State. (Registros que necesitan un Sello de Apostille, deben ser obtenidos por la Oficina Estatal.)		Preferred format (if available): (Prefiero.) <input type="checkbox"/> Computer-generated copy of original. (Copia del Original-Generado por Computadora) <input type="checkbox"/> Digital Image/Photocopy of original. (Imagen Digital/Fotocopia del Original)	
Name of Applicant (Nombre de Apicante)		Relationship to person on record (Proof is required if certified copy requested.) [Relación al individuo (Prueba es requerida para copia certificada.)]	
Current Mailing Address ( <b>Must Match address on ID</b> ) [Dirección Postal (Debe coincidir con identificación)]		Reasons for Request: (Motivo de solicitud)	
City (Ciudad)	State (Estado)	Zip Code (Codigo Postal)	<input type="checkbox"/> Passport (Pasaporte) <input type="checkbox"/> Driver's License (Licencia de Conducir) <input type="checkbox"/> School/Sports (Escuela/Deportes) <input type="checkbox"/> Veterans' Benefits (Beneficios veteranos) <input type="checkbox"/> Social Security Card (Tarjeta Seguro Social) <input type="checkbox"/> Social Security Disability (SSI / Incapacidad) <input type="checkbox"/> Other SS Benefits (Otros beneficios de seguro social) <input type="checkbox"/> Medicare (Medicare) <input type="checkbox"/> Welfare (Asistencia Pública) <input type="checkbox"/> Other (Otro) _____
Applicant's Signature (Firma del Apicante)		Date of Application (Fecha)	

<input type="checkbox"/> <b>BIRTH (NACIMIENTO)</b>	Full Name of Child at Time of Birth (Nombre Completo al Nacer)		No. Requested Copies (No. de Copias)
	Place of Birth (City, Town) [Lugar de Nacimiento (Ciudad, Pueblo)]	County (Condado)	Exact Date of Birth (Fecha de Nacimiento)
	Full Name of Child's Parent A (List name given at birth or on birth certificate) [Nombre completo de Padre/Madre A (Inscrito en el acta de nacimiento)]		
	Full Name of Child's Parent B (if on record) (List name given at birth or on birth certificate) [Nombre completo de Padre/Madre B (si el registro) (Inscrito en el acta de nacimiento)]		
	If the Child's Name was Changed, Indicate New Name and How it was Changed: (Si el nombre del niño fue cambiado, indique el nuevo nombre y como fue cambiado):		
<input type="checkbox"/> <b>MARRIAGE (MATRIMONIO)</b>	Full Name of Spouse A/Partner A (List name given at birth or on birth certificate) [Nombre de Esposo/Pareja (Inscrito en el acta de nacimiento)]		No. Requested Copies (No. de Copias)
	<input type="checkbox"/> <b>CIVIL UNION (UNIÓN CIVIL)</b>		Exact Date of Event (Fecha Exacta del Evento)
	Full Name of Spouse B/Partner B (List name given at birth or on birth certificate) [Nombre de Esposo/Pareja (Inscrito en el acta de nacimiento)]		
<input type="checkbox"/> <b>DOMESTIC PARTNERSHIP (SOCIEDAD DOMÉSTICA)</b>	Place of Event (City, Town) [Lugar del Evento (Ciudad, Pueblo)]	County (Condado)	
<input type="checkbox"/> <b>DEATH (DEFUNCIÓN)</b>	Name of Deceased Individual (Nombre del Fallecido)		
	Exact Date of Death (Fecha Exacta del Evento)		No. Requested Copies (No. de Copias)
	Place of Event (City/Town) [Lugar del Evento (Ciudad, Pueblo)]		County (Condado)
	Full Name of Deceased Individual's Parent A (List name given at birth or on birth certificate) [Nombre completo de Padre/Madre A (Inscrito en el acta de nacimiento)]		Full Name of Deceased Individual's Parent B (List name given at birth or on birth certificate) [Nombre completo de Padre/Madre B (Inscrito en el acta de nacimiento)]

**Application Checklist: Have you enclosed and completed all required information?  
(Lista Comprobada: ¿A Usted Incluido y Completado Toda la Información Requerida en la Aplicación?)**

- All Items on Application (Todo Artículos en la Aplicación)   
  Payment (Pago)   
  Acceptable Forms of ID (Identificación Aceptable)   
  Proof of Relationship (Prueba de Parentesco)   
  Mailing Address Matches ID (Dirección Postal Coincidente con ID)

**FOR OFFICIAL USE ONLY**

Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> M/O <input type="checkbox"/> Check <input type="checkbox"/> Waived	Payment Amount: \$	ID Viewed:	Processed By
--	-----------------------	------------	--------------

## *INSTRUCTIONS FOR A NON-GENEALOGICAL CERTIFICATION OR CERTIFIED COPY OF A VITAL RECORD*

When ordering a copy of a vital record you must first determine the type of copy that will meet your needs.

### **Types of copies:**

**Certified copies** have the raised seal of the office issuing the record and are always issued on State of New Jersey safety paper. Certified copies may be used to establish identity and are legal documents.

**Certifications** are issued on plain paper with no seal and clearly indicate they are not valid for establishing identity or for legal purposes. Certifications are generally only useful for genealogy. Certifications of death records do not contain the Social Security Number or the Cause of Death medical terminology.

### **To get a copy of a vital record, you must submit:**

Completed application

A copy of the proof(s) of your identity

The correct fee: **\$10.00 PER COPY (MAKE CHECK OR MONEY ORDER PAYABLE TO: Borough of Tenafly) (DO NOT SEND CASH)**

Proof of your relationship to the person listed on the vital record you are requesting (Only required for certified copies)

### **Non-Genealogical Records (current events) are:**

- Births occurring within the last 80 years
- Marriages occurring within the last 50 years
- Deaths occurring within the last 40 years
- All domestic partnerships and civil unions.

**You must be able to fully identify the record by providing all of the information listed below on the application form. Your request cannot be accepted unless you provide the information below.**

- Full name on the record you are looking for
- City where the event occurred
- Exact date of the event (month, day and year)
- Mother's maiden name
- Father's name (if recorded on the record)
- For Marriage, Civil Union or Domestic Partnership -- Instead of parents' names, you must provide the name of the spouse/partner.

You must provide acceptable ID in order to get a copy of any vital record. Copies of vital records **must** be mailed to the address listed on your identification.

**The following are acceptable forms of ID:** A current, valid photo driver's license or photo non-driver's license with current address **OR** A current, valid driver's license without photo and one alternate form of ID with current address **OR** Two alternate forms of ID, one of which must have current address.

**Alternate forms of ID are:** Vehicle registration, Vehicle insurance card, Voter registration, US/Foreign Passport, Immigrant Visa, Permanent Resident Card (Green card), Federal/State ID, County ID, School ID, Bank Statement (within previous 90 days), Utility bill (within the previous 90 days), Tax Return or W-2 for current/previous tax year.

People who are homeless can provide identification from a social worker or homeless shelter coordinator.

People who are incarcerated can provide legal imprisonment, conviction papers or release documents that include the name, social security number and all possible aliases used in the past or identification from a prison/probation official.

**Please do not send in original ID documents. Only copies are required.**

If you are looking for a **certified copy** of

- **your own** birth certificate and you have assumed your spouse's/civil union partner's surname - you must provide a copy of the certified copy of your marriage/civil union certificate to link the name on your current ID to the name on your birth certificate.
- **your child's** birth certificate  
you don't need any additional documents.

- **your spouse's/civil union partner's birth certificate**  
you must provide a copy of your marriage/civil union certificate.
- **your parent's or sibling's vital record**  
you must provide a copy of your birth certificate.
- **your grandparent's vital record**  
you must establish that you are the person's grandchild by providing proof that links the name on your ID to the name of the grandparent.

*For example, if you changed your last name after marriage/civil union and want a grandparent's vital record, you must:*

1. *Provide your marriage/civil union certificate to show your name at birth,*
2. *provide your birth certificate to identify your parent, and*
3. *provide the parent's birth certificate to identify the grandparent.*

**If you are not a person qualified to get a certified copy of a record**

- but **you are helping** a person receive a certified copy of a vital record they are eligible to receive you must show your valid ID and a notarized, written release authorizing you to get the record on that person's behalf **OR**, you can supply a written release from the person you are helping along with a copy of that person's valid photo ID.

**If you are an attorney**

- who is **executor** of an estate - you must supply proof of appointment as the executor.
- who is the **legal representative of the executor** of an estate - you must supply proof of legal retainer by the executor and proof of the appointment of the individual as the executor.
- who is the **legal representative of an individual** that is eligible to receive a certified copy of a vital record - you must supply proof of legal retainer by the eligible individual and their proof of relationship.
- who needs a certified copy of a vital record and **you are not the legal representative** of an eligible person - you must obtain a court order directing the State Registrar to issue a certified copy of the record. A subpoena is not sufficient to issue a copy of a vital record.