BOROUGH OF BRADLEY BEACH
VITAL STATISTICS AND REGISTRATION
701 MAIN STREET
BRADLEY BEACH, NJ 07720

APPLICATION FOR A *GENEALOGICAL* CERTIFICATION OR CERTIFIED COPY OF A VITAL RECORD

APLICACIÓN POR UNA COPIA CERTIFICADA Ó CERTIFICACIONES DE UN REGISTRO CIVIL ANCESTRO

☐ I would like a ***Certified Copy***. *(Quiero una copia certificada.)*
☐ I would like a ***Certification***. *(Quiero una certificación.)*
Documents in need of an **Apostille Seal** must be obtained from the State.
(Registros que necesitan un Sello de Apostille, deben ser obtenidos por la Oficina Estatal.)

If available, I prefer the format of the certified copy to be:
(Prefiero:)
☐ Computer-generated copy of original.
(Copia del Original- Generado por Computadora)
☐ Digital Image/Photocopy of original.
(Imagen Digital/Fotocopia del Original)

Name of Applicant *(Nombre de Aplicante)*			Relationship to person on record (Proof is required if certified copy requested.) *[Relación al individuo (Prueba es requerida para copia certificada.)]*	Reasons for Request: *(Motivo de solicitud)*
Current Mailing Address ***(Must Match address on ID)*** *[Dirección Postal (Debe coencedir con identificación)]*				☐ Genealogy *(Ancestral)*
City *(Ciudad)*	State *(Estado)*	Zip Code *(Codigo Postal)*	Daytime Telephone Number *(Número Telefónico)*	☐ Dual Citizenship *(Doble Ciudadania)*
Applicant's Signature *(Firma del Aplicante)*			Date of Application *(Fecha)*	☐ Estate Matters *(Cuestiones de Herencia)*
				☐ Other *(Otro)* _____

☐ **BIRTH** ***(NACIMIENTO)*** **(over 80 years ago)** ***(más de 80 años)***	Full Name of Child at Time of Birth *(Nombre Completo al Nacer)*		No. Requested Copies *(No. de Copias)*
	Place of Birth (City, Town) **(Optional)** *[Lugar de Nacimiento (Ciudad, Pueblo)]*	County *(Condado)*	Date of Birth or Year(s) to be searched *(Fecha de Nacimiento ó años de busqueda)*
	Full Name of Child's Parent A *(List name given at birth or on birth certificate)* **(Optional)** *[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)* **(Optional)** *[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):*		
☐ **MARRIAGE** ***(MATRIMONIO)*** **(over 50 years ago)** ***(más de 50 años)***	Full Name of Spouse A *(List name given at birth or on birth certificate)* *[Nombre de Esposo (Inscrito en el acta de nacimiento)]*		No. Requested Copies *(No. de Copias)*
	Full Name of Spouse B *(List name given at birth or on birth certificate)* *[Nombre de Esposo (Inscrito en el acta de nacimiento)]*		Date of Event or Year(s) to be searched *(Fecha del Evento ó años de busqueda)*
	Place of Event (City, Town) **(Optional)** *[Lugar del Evento (Ciudad, Pueblo)]*		County *(Condado)*
☐ **DEATH** ***(DEFUNCIÓN)*** **(over 40 years ago)** ***(más de 40 años)***	Name of Deceased *(Nombre del Fallecido)*		No. Requested Copies *(No. de Copias)*
	Place of Event (City/Town) **(Optional)** *[Lugar del Evento (Ciudad, pueblo)]*	County *(Condado)*	Date of Death or Year(s) to be searched *(Fecha de muerte ó años de busqueda)*
	Maiden Name of Deceased Individual's Mother **(Optional)** *(Nombre Soltera de la Madre)*		Name of Deceased Individual's Father **(Optional)** *(Nombre del Padre)*

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 Articulos 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: ☐ Cash ☐ M/O ☐ Check ☐ Waived	Payment Amount: $	ID Viewed:	Processed By

REG-38
APR 15

Borough of Bradley Beach Vital Statistics and Registration

APPLICATION FOR A CERTIFICATION OR A CERTIFIED COPY OF A VITAL RECORD

Fees: $10.00 per Certified Copy of a Vital Record

PLEASE TYPE OR PRINT CLEARLY! ALL ITEMS ARE REQUIRED UNLESS NOTED OTHERWISE.* PROOF OF IDENTITY IS REQUIRED. MAKE CHECK OR MONEY ORDER PAYABLE TO "**BOROUGH OF BRADLEY BEACH**". DO NOT MAIL CASH.

To obtain a copy of a vital record, the event must have occurred in the Borough of Bradley Beach. If you are requesting a certification (an informational copy of a vital record not valid for legal purposes) you do **not** need to provide proof of relationship. If you are requesting a **certified copy**, proof of relationship is required that establishes you are: 1) The subject of the record 2) The subject's parent, legal guardian or legal representative 3) The subject's spouse/civil union partner/domestic partner; child, grandchild or sibling, if of legal age 4) A state or federal agency for official purposes 5) pursuant to court order.

For an application for a vital record to be processed, please complete the application and return it with the following: 1) Copy of photo ID showing address, or photo ID without address and **one** ID with address, or 2 alternate forms of ID with address (must be same address on both ID's). Please note that the certified copies will only be mailed to the address shown on the identification. 2) If you are not an immediate relative of the person(s), i.e. spouse, parent, child, grandchild, sibling, named on the vital record, you must provide a copy of the document appointing you as the legal guardian or legal representative or a copy of a Court Order or Subpoena.

ADDRESS YOUR ENVELOPE TO:

Registrar of Vital Statistics
Borough of Bradley Beach
701 Main Street
Bradley Beach, NJ 07720

Phone 732 776-2999 ext 1029 or 1011

Acceptable Forms of Identification

A valid photo driver's license or photo non-driver's license

Or

A valid driver's license with photo and an alternate form of ID with current address

Or

Two alternate forms of ID with current address

Alternate Forms of ID:

Vehicle registration
Insurance card
Voter registration
Passport
Green Card
County ID
School ID
Utility bill (within the previous 90 days)
Bank Statement (within the previous 90 days)
Tax Return for current or previous year

Additional information is on following pages

VITAL RECORDS ARE NEVER FAXED. Your certified record request will be sent via regular mail unless you make other arrangements with our office.

State Office of Vital Statistics: http://www.state.nj.us/health/vital