

City of Linwood
Application Process
For obtaining a Certified Copy of a Vital Record

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.

Applications require the applicant to provide a completed application, valid proof of identity, payment of \$5.00, and proof that establishes you are:

- The subject of the record,
- The subject's parent, legal guardian or legal representative,
- The subject's spouse/civil union partner, domestic partner, child, grandchild or sibling, if of legal age
- A state or federal agency for official purposes, or
- Pursuant to a court order.
- A bank, title or insurance company requesting a copy of a death certificate for official business.

Note: All items are required, except Social Security Number, which is only required for Bank, Title, and Insurance Companies requesting copies of death certificates.

Valid proof of identity:

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

Proof of relationship:

- **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.
- **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 the **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)

City of Linwood

APPLICATION FOR A CERTIFIED COPY OF A VITAL RECORD

A **Certified Copy** of a vital record event is issued to those individuals who have a direct link to the individual(s) named on the vital record event, as identified in the Governor of New Jersey's Executive Order 18 of 2002, and provided that the requestor is able to identify the vital record and can provide proof of his identity and relationship. A Certified Copy will contain a raised Seal and can be used for legal or identification purposes.

PLEASE TYPE OR PRINT CLEARLY! ALL ITEMS ARE REQUIRED UNLESS NOTED OTHERWISE. PROOF OF IDENTITY IS REQUIRED. MAKE CHECK PAYABLE TO "CITY OF LINWOOD." DO NOT MAIL CASH. MAIL APPLICATION, ID, AND PAYMENT TO THE CITY CLERK'S OFFICE, LINWOOD CITY HALL, 400 POPLAR AVENUE, LINWOOD, NJ 08221. COPIES ARE \$5.00 EACH.

Name of Applicant		Relationship to Person on Record (Proof is required)	Why is record being requested? <input type="checkbox"/> Passport <input type="checkbox"/> Driver License <input type="checkbox"/> School/Sports <input type="checkbox"/> Social Security Card <input type="checkbox"/> Soc. Sec. Disability <input type="checkbox"/> Other Soc. Sec. Benefits <input type="checkbox"/> Veterans Benefits <input type="checkbox"/> Medicare <input type="checkbox"/> Welfare <input type="checkbox"/> Other: _____	
Current Mailing Address (Must Match address on ID)				
City	State Zip Code	Telephone Number		
Signature of Applicant		Date of Application		
MARRIAGE	Name of Husband		No. of Copies Requested	
	Maiden Name of Wife		Exact Date of Marriage	
	Place of Marriage (City/Town)		County	
CIVIL UNION	Name of Applicant		No. of Copies Requested	
	Name of Applicant		Exact Date of Civil Union	
	Place of Civil Union (City/Town)		County	
DOMESTIC PARTNERSHIP	Name of Partner		No. of Copies Requested	
	Name of Partner		Exact Date Registered	
	Place Where Domestic Partnership Registered (City/Town)		County	
BIRTH	Full Name of Child at Time of Birth		No. of Copies Requested	
	Place of Birth (City/Town)	County		
	Exact Date of Birth			
	Child's Mother's Full Maiden Name		Child's Father's Name (if on record)	
	If Child's Name Was Changed, Indicate New Name and How It Was Changed			
DEATH	Name of Deceased		Social Security Number (See Note)	No. of Copies Requested
	Exact Date of Death	Place of Death (City/Town)		County
	Maiden Name of Deceased Individual's Mother		Name of Deceased Individual's Father	
FOR MUNICIPAL 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: