



Municipal Building
59 South White Horse Pike
Berlin, New Jersey 08009

Phone: (856) 767-7777, ext. 302/303
www.berlinnj.org

APPLICATION FOR CERTIFIED COPY OF BIRTH, MARRIAGE/CIVIL UNION OR DEATH RECORD

BY ORDER OF THE GOVERNOR, ALL REQUESTS MUST BE ACCOMPANIED BY COPY OF PHOTO I.D. WITH ADDRESS OR OTHER FORM OF PHOTO I.D. WITH ONE (1) ADDITIONAL FORM OF I.D. WITH ADDRESS (acceptable forms of I.D. are driver's license with photo, vehicle registration, insurance card, voter registration, passport, green card, utility bills & tax bills).

MAIL IN APPLICATION MUST BE COMPLETED IN FULL AND PAID WITH MONEY ORDER FOR CORRECT AMOUNT, MADE PAYABLE TO BERLIN BOROUGH, AND MUST INCLUDE A SELF-ADDRESSED STAMPED ENVELOPE. Mail to: Berlin Borough 59 S. White Horse Pike Berlin, N.J. 08009 Attention: Vital Statistics.

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Relationship: (Circle) Self Parent Sibling Spouse Grandchild

Why is certified copy being requested: (Circle) Newborn School/sports Driver's License

Travel/Passport Social Services Social Security Veteran's Benefits Genealogy

Other (Specify): _____

BIRTH - FEE - \$10.00 PER CERTIFIED COPY

• Name _____

• Date of Birth _____

• Father's Name _____

• Maiden Name of Mother _____

• Number of Copies _____ @ \$10.00 per certified copy

MARRIAGE OR CIVIL UNION, – FEE- \$10.00 PER CERTIFIED COPY

- Name of Spouse _____
- Maiden Name of Spouse _____
- Date of Marriage, Civil Union, Domestic Partnership _____
- Number of Copies _____ @ \$10.00 per certified copy

DEATH – FEE- \$10.00 PER CERTIFIED COPY

- Name of Deceased _____
- Date of Death _____
- Do you need cause of death on certificate? Yes / No
- Number of Copies _____ @ \$10.00 per certified copy

Signature of Applicant _____ Date _____

[Office Use Only:]

Driver's License # & State issued _____

Passport # & Country of Issuance _____

Other _____