

<p>Copy of required ID must be included.</p> <p style="text-align: center;">Enclose \$10 per copy payable to: New Lebanon Town Clerk</p>	<p>Mail to:</p> <p style="text-align: center;">New Lebanon Town Clerk Vital Records Request P.O. Box 328 New Lebanon, NY 12125</p>
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CERTIFICATE INFORMATION

Name of Groom (as recorded on marriage license):		Groom's Date of Birth: <i>(or age at time of marriage):</i>
<i>First</i> <i>Middle</i> <i>Last</i>	<i>(mm/dd/yyyy)</i>	
Name of Bride (as recorded on marriage license):		Bride's Date of Birth: <i>(or age at time of marriage):</i>
<i>First</i> <i>Middle</i> <i>Last</i>	<i>(mm/dd/yyyy)</i>	
If Bride was previously married, state name used at that time:		Date of Marriage:
<i>First</i> <i>Middle</i> <i>Last</i>	<i>(mm/dd/yyyy)</i>	
Residence of Groom (at time of marriage):	Residence of Bride (at time of marriage):	
<i>County</i> <i>State</i>	<i>County</i> <i>State</i>	
Place where License was issued:	Place where Marriage was performed:	
<i>Town or City</i> <i>County</i>	<i>Town or City</i> <i>County</i>	
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 record is required:	

If you are not the bride or groom, submit documentation of a judicial or other proper purpose. An example of a judicial or other proper purpose would be a marriage record needed by the applicant to claim a benefit. Documentation would consist of a copy of a court order or an official letter verifying that a copy of the requested marriage record is required from the applicant in order to process a claim.

Applications being submitted through the mail require a notarized signature along with copy of ID.

Signature of Applicant: _____	Date: _____	\$10 x _____ Copies = \$ _____
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<p>Address of Applicant: (PRINT)</p> <p>_____</p> <p><i>(Applicant's Name)</i></p> <p>_____</p> <p><i>(Street)</i></p> <p>_____</p> <p><i>(City)</i> <i>(State)</i> <i>(Zip)</i></p> <p>Telephone No.: ()</p>	<p>Please print or type the name and address where record should be sent if different than applicant's:</p> <p>_____</p> <p><i>(Name)</i></p> <p>_____</p> <p><i>(Street)</i></p> <p>_____</p> <p><i>(City)</i> <i>(State)</i> <i>(Zip)</i></p>
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<p>Notary (if required):</p>	<p><i>Types of Acceptable Identification:</i></p> <ul style="list-style-type: none"> Driver's license Non-driver's license Passport Other government issued photo-ID
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