NEW YORK STATE DEPARTMENT OF HEALTH Vital Records Section, Genealogy Unit P.O. Box 2602 Albany, New York 12220-2602

# General Information and Application For Genealogical Services

#### VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.

- 1. FEE \$22.00 includes search and uncertified copy or notification of no record.
- 2. Original records of births and marriages for the entire state begin with 1881, deaths begin with 1880, EXCEPT for records filed in Albany, Buffalo and Yonkers prior to 1914. Applications for these cities should be made directly to the local office.
- 3. The New York State Department of Health does not have New York City records except for births occurring in Queens and Richmond counties for the years 1881 through 1897.
- 4. Please read the Administrative Rule Summary on the reverse side of this sheet which specifies years available for genealogical research.

To insure a complete search, provide as much information as possible. Please complete for type of record requested, birth, death OR marriage.

100000001				
Nan	ne at Birth	Name at Birth		
10000000001	e of Birth	Date of Birth		
E Plac	ee of Birth	Place of Birth		
B33333333	ner's Name ————————————————————————————————————	Father's Name		
Mot	her's Maiden Name	Mother's Maiden Name		
o Nan	ne of Bride	Name of Bride		
Nam	ne of Groom	Name of Groom———————————————————————————————————		
Date	e of Marriage ————————————————————————————————————	Date of Marriage —		
	e of Marriage for License	Place of Marriage and/or License —		
	ne at Death	Name at Death		
Date	e of Death Age at Death	Date of Death Age at Death		
Plac	e of Death	Date of Death Age at Death		
△ Nam	nes of Parents —	Names of Parents —		
	ne of Spouse	Name of Spouse		
For what	purpose is information required?			
What is v	rour relationship to person whose record is request	red?		
-	apacity are you acting?			
SIGNATURE OF APPLICANT DATE				
	S			
Send recor	d to: (please print)	If requesting birth and marriage records, please sign the following		
Name		statement: To the best of my knowledge, the person(s) named in the application		
Address		are deceased.		
City	State Zip Code	SIGNATURE OF APPLICANT		
	2 (06/2003)	(over)		

# Health Commissioner's Administrative Rules and Regulations Summary

### 1. Genealogical Research

Uncertified copies or abstracts from records of birth, death, and marriage may be provided for genealogical research purposes subject to the restrictions specified in this summary. All requests must be submitted in writing and include payment of the applicable statutory fee. The applicant shall be required to pay the specified fee for the time spent for the search and uncertified copy of notification of no record.

## 2. Who is authorized to do the searching?

Record searches shall be conducted only by the following persons in the files maintained by their respective agencies:

- a. authorized employees of the State Department of Health;
- b. a local registrar, deputy registrar, or an authorized employee of the registrar;
- c. a town or city clerk, deputy clerk, or an authorized employee of the town or city clerk.

#### 3. What records are available?

- a. No information shall be released from a record of birth which has been placed in a confidential file pursuant to Public Health Law Section 4138.
- b. No information shall be released from a record of birth unless the record has been on file for at least 75 years and the person to whom the record relates is known to the applicant to be deceased.
- No information shall be released from a record of death unless the record has been on file for at least 50 years.
- d. No information shall be released from a record of marriage unless the record has been on file for at least 50 years and the parties to the marriage are known to the applicant to be deceased.
- e. The time periods specified in (3B), (3C), and (3D) are waived if the applicant is a descendant or has been designated to act on behalf of a descendant of the person whose record is being requested. A descendant is a person in the direct line of descent. The applicant shall provide documentation of descendancy prior to the release of information in those instances where a waiver of the waiting period is requested. A party acting on behalf of a descendant shall further provide documentation that the descendant authorized the party to make such application.
- f. All uncertified copies, abstracts, or information issued for genealogical research purposes shall be clearly marked with the statement "For Genealogical Purposes Only."

### 4. Genealogy Fee Schedule

Fee schedule per one spelling of name. Fee varies depending on requested number of years to be searched. Unused fees will be refunded.

1-3 years	\$22.00	31-40 years	\$102,00
4-10 years	\$42.00	41-50 years	\$122.00
11-20 years	\$62.00	51-60 vears	\$142.00
21-30 years	\$82.00	61-70 years	\$162.00