



REQUEST FOR CERTIFIED COPY
OF CIVIL UNION CERTIFICATE

Number of copies _____ at **\$20.00 per copy** = Total

Date of CIVIL UNION CEREMONY (Full Date Required) _____

Birth Name of Partner A _____

Birth Name of Partner B _____

Town Where Marriage Took Place _____

Reason for obtaining Certificate : _____

Person requesting copy: Name: _____

Address _____

Tel # _____

Relationship to person on Certificate: _____

Please enclose the following with your request:-

- **Copy of photo driver's license** with current address –**or**
- **2 other forms of ID** i.e.
- **Utility Bill, Telephone Bill, (within past two months) Bank Statement. Lease, Deed, Tax Return,**
- **Return envelope** with same address as on ID –
- **Fee - money order or check (no cash) Payable to “Township of Montclair”**
- **(we can only return to address on ID).**
- **Only IMMEDIATE relatives may obtain certified copy**
- **Name on ID must correspond with name on certificate.**
- **Siblings must provide THEIR birth certificate with same parents names.**

Mail to:- Township Of Montclair
Vital Statistics
205 Claremont Avenue
Montclair NJ 07042

(For rush delivery) – Use only
Post Office Overnight Express
with return envelope completed
NO OTHER CARRIER

Questions: Please call Registrar of Vital Statistics - Anne Shields at (973) 509 4973