



**Town of Mamaroneck**  
**Office of the Town Clerk, Town Center**  
**740 West Boston Post Road,**  
**Mamaroneck, NY 10543-3353**

**Christina Battalia, CMC, RMC**  
**Mamaroneck Town Clerk**

**TEL: 914/381-7870**  
**FAX: 914/381-7813**

**[cbattalia@townofmamaroneckny.org](mailto:cbattalia@townofmamaroneckny.org)**

To whom it may concern,

Copies of vital records for persons who were born, died or obtained their marriage license in the Town of Mamaroneck are on file with the Town Clerk. Birth records can be issued to the person named if 18 or older, parents of the named, or their lawful representative. Marriage records can be issued to the bride or groom, or their lawful representative. Death certificates may be issued to current spouse, parent, child, or sibling of the deceased, or their lawful representative.

**PLEASE NOTE WE ARE NOT PERMITTED TO GIVE PHONE VERIFICATION OF VITAL RECORDS, NOR CAN WE ACCEPT CREDIT CARD INFORMATION BY PHONE OR EMAIL.**

In order to initiate a search and obtain a copy of a vital record a completed signed request form must be submitted by mail (address above) a check made out to the Town of Mamaroneck in the amount of \$10.00 per copy, and a copy of one of the following identifications:

- Driver's License
- State issued non-driver ID
- Passport
- U.S. Military issued photo ID

Your documentation must demonstrate your legal right to obtain a vital record. You may be asked for addition documentation such as a birth certificate, a marriage certificate, or legal documentation.

Please feel free to call us or email us with any question.

Christina Battalia  
Mamaroneck Town Clerk

**TYPE OF RECORD DESIRED (Enter Number of Copies)**

<p>Search &amp; Copy of Marriage Certificate <input type="checkbox"/> Fee \$10.00 per copy</p> <p>A Certified Transcript is an abstract from the marriage record issued under the seal of the town/city clerk. It includes the names of the contracting parties, their residence at the time the license was issued, date and place of marriage as well as date and place of birth of the bride and groom.</p> <p>A Certified Transcript may be used as proof that a marriage occurred.</p>	<p>Search &amp; Copy of Executed Marriage License "Long Form" <input type="checkbox"/> Fee \$10.00 per copy</p> <p>A Certified Copy includes all of the items of information occurring on the original record of the marriage.</p> <p>A Certified Copy may be needed where proof of parentage and certain other detailed information may be required such as: passports, veteran's benefits, court proceedings, or settlement of an estate.</p>
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**Bride/Groom/Spouse**

Name (as recorded on marriage license):			Date of Birth: <small>(or age at time of marriage)</small>	
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Birth Name (if different)</i>	
If Previously Married, State Name Used at that Time:			Residence (at time of marriage):	
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>County</i>	<i>State</i>

**Bride/Groom/Spouse**

Name (as recorded on marriage license):			Date of Birth: <small>(or age at time of marriage)</small>	
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Birth Name (if different)</i>	
If Previously Married, State Name Used at that Time:			Residence (at time of marriage):	
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>County</i>	<i>State</i>

**Marriage Information**

Place Where Marriage License Was Issued:	Place Where Marriage Was Performed:	Marriage Certificate No.: <small>(if known)</small>	Local Registration No.: <small>(if known)</small>
<i>Town or City</i> <i>County</i>	<i>Town or City</i> <i>County</i>		
Purpose for which record is required:			Date of Marriage or Period Covered by Search: <b>Married on or Search from:</b> _____ <small>(mm / dd / yyyy)</small>
In what capacity are you acting?:	What is your relationship to person whose record is required? <small>(If self, state "SELF".)</small>	<b>Search to:</b> _____ <small>(if searching period) (mm / dd / yyyy)</small>	
If attorney, give name and relationship of your client to person whose record is required:			

Signature of Applicant	Date:	Applicant's Phone Number:
Name of Applicant:		Please print name and address where record is to be sent:
Address of Applicant:		
<i>City</i>	<i>State</i> <i>ZIP</i>	<i>City</i> <i>State</i> <i>ZIP</i>