

Robbinsville Township

Mercer County

Request for Certified Copies of a Civil Union or Marriage

Exact date of event	Full name of Partner 1 (name given at birth)	Full name of Partner 2 (name given at birth)		
Name of person requesting record		Daytime phone number of requestor		
Address where record should be mailed	City	State	Zip	
Requestor's Relationship to Couple: (Proof Required) <input type="checkbox"/> Self <input type="checkbox"/> Parent <input type="checkbox"/> Child <input type="checkbox"/> Sibling <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Legal Representative <input type="checkbox"/> Other _____				

You must include the following when mailing this request:

- Copy of Photo ID showing the address to which record is being sent

Note: If you do not have a photo ID showing the address to which the record will be sent, you may submit a photo ID without the address (green card, work ID, school ID) AND one other form of ID showing the shipping address.

OR

2 alternate forms of ID showing requestor's name and shipping address - (such as an insurance card, voter registration card, utility bill, lease, bank statement, or deed)

- Check or Money Order - \$10 each certificate

Make Checks Payable To: ROBBINSVILLE TOWNSHIP

Mail this form to: Robbinsville Township Clerk's Office
 1 Washington Blvd., 2nd Floor, Suite 6
 Robbinsville, NJ 08691
 (609) 918-0002 Ext 104

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 Multiple years will not be searched. You will be notified within 7 days of receipt of request as to the availability of the requested record. Death records will not include cause of death unless requested and a certification is filed by an authorized individual.

- Approved Denied, Reason _____

Date _____

Init _____