

General Information and Application for Genealogical Services

VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.

Return to: Bennington Town Clerk, 905 Old Alleghany Road, Attica NY 14011

1. FEE - \$10.00 includes search and uncertified copy or notification of no record. Make checks payable to Bennington Town Clerk.

To insure a complete search, provide as much information as possible.
Please complete the applicable section for each type of record requested: birth, death or marriage.

| | | | | | |
|-----------------|---|----------------------|-----------------|---|----------------------|
| Birth | Name at Birth Date of Birth Place of Birth Father's Name Mother's Maiden Name | State File Number | Birth | Name at Birth Date of Birth Place of Birth Father's Name Mother's Maiden Name | State File Number |
| Marriage | Name of Bride Name of Groom Date of Marriage Place of Marriage and/or License | State File Number | Marriage | Name of Bride Name of Groom Date of Marriage Place of Marriage and/or License | State File Number |
| Death | Name at Death Date of Death Place of Death Names of Parents Name of Spouse State File Number | Age at Death | Death | Name at Death Date of Death Place of Death Names of Parents Name of Spouse State File Number | Age at Death |

For what purpose is information required?

What is your relationship to person whose record is requested?

In what capacity are you acting?

SIGNATURE OF APPLICANT _____ DATE _____

Address _____

Phone _____

Send record to: (please print)

Name _____

Address _____

City _____ State _____ Zip Code _____

If requesting birth and marriage records, please sign the following statement:
To the best of my knowledge, the person(s) named in the application are deceased.

SIGNATURE OF APPLICANT