

TOWNSHIP OF NORTH BRUNSWICK
MUNICIPAL CLERK'S OFFICE
710 HERMANN ROAD
NORTH BRUNSWICK, N.J. 08902
732-247-0922 ext. 470 FAX: 732-745-0976

APPLICATION TO MAKE A CORRECTION ON A VITAL RECORD
MUST PROVIDE PROOF OF DRIVER'S LICENSE OR PASSPORT

TODAY'S DATE: _____ PHONE # _____

DOCUMENTAL PROOF IS NEEDED FOR CORRECTIONS
PLEASE INDICATE WHAT NEEDS TO BE CORRECTED
THERE WILL BE A CORRECTION FEE OF \$15.00 AS OF JULY 29, 2004

BIRTH- CERTIFIED COPY \$7.00

NAME ON RECORD: _____ DATE OF BIRTH: _____

PLACE OF BIRTH: _____
(TOWN, STATE, WHERE BIRTH TOOK PLACE)

MOTHER'S MAIDEN NAME: _____

NAME OF FATHER: _____

MARRIAGE- CERTIFIED COPY \$7.00

DATE OF MARRIAGE: _____

PLACE OF MARRIAGE: _____
(TOWN, STATE, WHERE MARRIAGE TOOK PLACE)

FULL NAME OF GROOM: _____

BRIDE'S MAIDEN NAME: _____

DEATH-CERTIFIED COPY \$7.00

FULL NAME OF DECEASED: _____

DATE OF DEATH: _____

PLACE OF DEATH: _____
(TOWN, STATE, WHERE DEATH TOOK PLACE)

FATHER'S NAME: _____

MOTHER'S FULL MAIDEN NAME: _____

RELATIONSHIP TO DECEASED: _____

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