

General Information and Application for Genealogical Services

VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.

Return to: Town of Covert Town Clerk, P.O. Box 265, Interlaken, NY 14847 or Email: covertclerk@rochester.rr.com

1. FEE - \$10.00 includes search and uncertified copy or notification of no record. Make checks payable to: *Covert Town Clerk*
2. Original registry records of births, deaths and marriages for the Town of Covert, Farmer Village and Village of Interlaken begin with 1882.

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

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 _____

Available Records

- *No information shall be released from a record unless the person to whom the record relates is known to the applicant to be deceased.
- *No information shall be released unless the record has been on file for a minimum required period: birth records must have been on file for at least 75 years, death records for 50 years, marriage records for 50 years (both parties to the marriage must be deceased).
- *The time periods above are waived if the applicant is a descendant and provides documentation of direct line descent. A party acting on behalf of a descendant shall further provide documentation that the descendant authorized the party to make such application.

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