

Instructions for Genealogy Searches for the City of Poughkeepsie

Our genealogy record searches go back to 1881 for any death, marriages or births that pertain to the City of Poughkeepsie ONLY.

Records from 1881 to 1923 are open record. Records from 1923 to present date, proof of relationship is required to obtain them.

The fee is \$22.00 for each search whether we find the record or not.

To request records by mail, please complete the attached application and enclose a self-addressed, stamped envelope along with a copy of your photo ID and a money order for \$22.00 per record. This fee is non-refundable.

Please follow the fees schedule listed below. Please make money order or bank check payable to the "City of Poughkeepsie". PLEASE DO NOT SEND CASH.

Mail the request to: Office of Vital Statistics
62 Civic Center Plaza
Poughkeepsie, NY 12601

Fee Schedule: If no record is on file, a **No Record Certification** is issued and the fee is NOT refunded.

- **For standard search:** This includes a three (3) year search. The fee is \$22.00 per copy. The fee is for each name or type of record requested.
- **For long search:** When more than a three-year search is requested, the fee for each record in need of a longer search is higher according to the following schedule:

1 - 3 years	\$22.00	<i>The fee applies separately to each record requested. For example, the fee for a request consisting of one birth record (1-year search), plus one death record (24-year search), plus one marriage record (11-year search) is a total of \$166.00 (\$22 + \$82 + \$62 = \$166)</i>
4 - 10 years	\$42.00	
11 - 20 years	\$62.00	
21 - 30 years	\$82.00	
31 - 40 years	\$102.00	
41 - 50 years	\$122.00	
51 - 60 years	\$142.00	
61 - 70 years	\$162.00	
71 - 80 years	\$182.00	

Processing Time

- Application submitted for the search will take **up to 8 weeks to process.**

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.

New York State Department of Health Vital Records Application for Genealogical Search

VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.

1. FEE - \$22.00 includes search of up to three (3) years and uncertified copy or notification of no record.
2. Original records of births and marriages for the entire state begin with 1881, deaths begin with 1880, EXCEPT for records filed in Albany, Buffalo and Yonkers prior to 1914. Applications for these cities should be made directly to the local office.
3. The New York State Department of Health does not have New York City records except for births occurring in Queens and Richmond counties for the years 1881 through 1897.
4. Please read the instruction page for details on fees and record availability.

**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:	Birth	Name at Birth:
	Date of Birth: State File #:		Date of Birth: State File #:
	Place of Birth:		Place of Birth:
	Father's Name:		Father's Name:
	Mother's Maiden Name:		Mother's Maiden Name:
Marriage	Name of Bride:	Marriage	Name of Bride:
	Name of Groom:		Name of Groom:
	Date of Marriage: State File #:		Date of Marriage: State File #:
	Place of Marriage and/or License:		Place of Marriage and/or License:
Death	Name at Death:	Death	Name at Death:
	Date of Death: Age at Death:		Date of Death: Age at Death:
	Place of Death:		Place of Death:
	Name of Parents:		Name of Parents:
	Name of Spouse:		Name of Spouse:
	State File Number:		State File Number:
For what purpose is information required?		In what capacity are you acting?	
What is your relationship to person whose record is requested?			
Applicant's statement: To the best of my knowledge, the person(s) named in the application is(are) deceased.			
SIGNATURE OF APPLICANT:		Date:	
Name & Address of Applicant Name of Applicant:		Name & Address where record should be sent: Name:	
Street:		Street: (or PO Box)	
City:		City:	
State & Zip:		State & Zip:	
Applicant's Phone Number:			