

Genealogy Requests

Birth, death and marriage records are not public information and searches will be done by the City Clerk, Deputy City Clerk, or authorized office personnel ONLY.

Fee for searches:

\$22.00 for a 1-3 year search per name
42.00 for a 4-10 year search per name
62.00 for an 11-20 year search per name
82.00 for a 21-30 year search per name

Records of Births, Deaths, and Marriages dating back to 1882 are filed in our office.

- Marriage Licenses that were originally purchased at the Geneva City Clerk's Office
- Birth Records when the birth occurred within the City limits
- Death Records when the decedent was pronounced deceased within the City limits

Time Restrictions:

Marriages: No information shall be issued unless the record has been on file for at least 50 years and both parties named in the record are known to the applicant to be deceased.

Births: No information shall be issued unless the record has been on file for at least 75 years and known to the applicant to be deceased.

Deaths: No information shall be issued unless the record has been on file for at least 50 years.

The time restrictions may be waived if the applicant can show they are a direct descendent and have documentation to show proof of death or other documentation verifying the need for a search.

Due to the small number of staff in the Clerk's Office, walk-in search requests are discouraged. If you can call ahead, we would be happy to get the information ready for you to pick up at a later time.

Requests may be mailed to: Geneva City Clerk's Office
47 Castle Street
Geneva, NY 14456

Contact the City Clerk at (315) 789-2603 for appropriate copy fee.

General Information and Application For Genealogical Services

VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.

1. FEE - \$22.00 includes search and uncertified copy or notification of no record.

To insure a complete search, provide as much information as possible.
 Please complete for 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 _____	Birth	Name at Birth _____ Date of Birth _____ Place of Birth _____ Father's Name _____ Mother's Maiden Name _____
Marriage	Name of Bride _____ Name of Groom _____ Date of Marriage _____ Place of Marriage and/or License _____	Marriage	Name of Bride _____ Name of Groom _____ Date of Marriage _____ Place of Marriage and/or License _____
Death	Name at Death _____ Date of Death _____ Age at Death _____ Place of Death _____ Names of Parents _____ Name of Spouse _____	Death	Name at Death _____ Date of Death _____ Age at Death _____ Place of Death _____ Names of Parents _____ Name of Spouse _____

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 _____

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