



Genealogical Search for Marriage Records

The Troy City Clerk's office performs genealogical searches for marriages only. If you require birth or death records, contact the Office of Vital Records at (518) 279-7309 or see <http://www.troyny.gov/departments/vital-records/genealogy/>.

New York State began statewide registration of births, marriages, and deaths in 1880-81. Compliance with the law was uneven for several decades, so certificates are lacking for many events. Marriage Records for the City of Troy date back to November 1881, and a transcript—not an image or photocopy—can be provided for records we have on file. Note that the City Clerk's office only holds New York State-issued marriage records; church records are held by the church or, in some cases, may have been donated to the Hart Cluett Museum (<https://www.hartcluett.org/library>).

No information shall be released unless the marriage record has been on file for 50 years (both parties to the marriage must be deceased). The time period will be 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 notarized documentation that the direct descendant authorized the party to make such application.

A Genealogical Services Application should be filled out and accompanied by a check for \$22.00 for each search. Checks should be made payable to the Troy City Clerk.

We ask that one week be given to complete the search. Please note that the fee covers the cost of the search, not the cost of the record. The fee still applies even if the record was not found.

Keep in mind that records are on file in the municipality where the license was originally applied for, not where the ceremony took place (e.g., if a couple obtained a license in Albany and had the ceremony in Troy; the record would be on file in Albany).

If you are unsure where in New York State the license was filed, contact the New York State Department of Health: https://www.health.ny.gov/vital_records/genealogy.htm

If the marriage license was filed with the Troy City Clerk, complete the following page and mail your request directly to:

Troy City Clerk
City Hall
433 River Street
Troy, NY 12180

General Information and Application for Genealogical Services

VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.

Return to: New York State Department of Health, Vital Records Section, P.O. Box 2602, Albany, NY 12220-2602

1. FEE - \$22.00 includes search 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 Administrative Rule Summary on the reverse side of this sheet which specifies years available for genealogical research.

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

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