

TOWN OF SOUTHAMPTON

Main Office

116 HAMPTON ROAD
SOUTHAMPTON, NY 11968

Phone: (631) 287-5740

Fax: (631) 283-5606



OFFICE OF TOWN CLERK SUNDY A. SCHERMAYER

Town Clerk Annex

Phone: (631) 723-2712

Fax: (631) 723-3080

Website:

www.southamptontownny.gov

Genealogy Records & Resources

What types of vital records are available from the Town of Southampton Clerk's Office?

Uncertified copies of the following types of records are available for genealogy research purposes:

- Birth Certificates* – if on file for at least **75yrs** and the person named on the certificate is known to be deceased.
- Death Certificates – if on file for at least **50yrs**.
- Marriage Certificates* – if on file for at least **50yrs** and the couple are known to be deceased.

* - Require proof that the person(s) named in the search are deceased.

Note – births and deaths which take place in Southampton Hospital beginning in 1923 will be on file with the Southampton Village Clerk 631-283-0247

Are the above time periods ever waived?

Yes, the time periods are waived for direct-line descendents (i.e. child, grandchild, great grandchild). The direct-line descendent must provide the following:

- Proof of their relationship to the person whose record they are requesting.
- Proof of the death of the person whose birth certificate they are requesting.
- Proof of the death of the couple whose marriage certificate they are requesting.

What is the fee for a genealogy search?

The standard fee is \$11.00 for a single search up to three-years. This includes an uncertified copy of the record or a no-record report. The following chart indicates the fee for searching more than three-years:

Period Search	Fee
1 to 3 years	\$11.00
4 to 10 years	\$21.00
11 to 20 years	\$31.00
21 to 30 years	\$41.00
31 to 40 years	\$51.00
41 to 50 years	\$61.00
51 to 60 years	\$71.00
61 to 70 years	\$81.00
71 to 80 years	\$91.00
81 to 90 years	\$101.00

(This fee applies to each name or type of record requested.)

Download PDF Application Form Here: [genealogy search application](#)

How to I order an uncertified copy of a vital record?

Mail the completed application, payment and a stamped, self-addressed envelope to:

Southampton Town Hall
Sundy A. Schermeyer, Town Clerk
116 Hampton Road
Southampton, NY 11968

Apply in person at the above address.

Other Genealogical Resources in New York State:

- New York State Archives (www.archives.nysed.gov)
- New York City Municipal Archives (www.nyc.gov)
- Town of East Hampton (www.town.east-hampton.ny.us)
- Town of Riverhead (www.riverheadli.com)
- Village of Southampton (www.southamptonvillage.org)

Genealogy Records Application

VITAL RECORDS COPIES CANNOT BE PROVIDED FOR COMMERCIAL PURPOSES.
 Return to: Town Clerk, Town of Southampton, 116 Hampton Road, Southampton, NY 11968

1. FEE: \$11.00 includes a single search for up to three-years and an uncertified copy or notification of no-record. See fee schedule for period searches beyond 3-years.
2. Please read the informational sheet for specifics related to Genealogical Research.
3. For birth & deaths occurring in Southampton Hospital, please contact the Village of Southampton at 631-283-0247.

To insure a complete search, provide as much information as possible.

Please complete the applicable section for each type of record requested.

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 _____
Marriages	Names on License (birth, maiden or other) _____ Date of Marriage _____ License must have been acquired in the Town of SH.	Marriages	Names on License (birth, maiden or other) _____ Date of Marriage _____ License must have been acquired in the Town of SH.
Death	Name at Death _____ Date of Death _____ Age at Death _____ Place of Death _____	Death	Name at Death _____ Date of Death _____ Age at Death _____ Place of Death _____

What is the intended use of this information? _____

What is your relationship to person whose record is requested? _____

In what capacity are you acting? _____

SIGNATURE OF APPLICANT _____ **DATE** _____

Applicant Address _____ Phone _____

If requesting birth and marriage records, please sign the following statement:

<p><i>To the best of my knowledge, the person(s) named in the application are deceased.</i></p> <p>_____</p> <p style="text-align: center;">Signature of Applicant</p>	<p style="text-align: right;">Send record to: (please print)</p> Name _____ Address _____ City _____ State _____ Zip Code _____
--	--