New Jersey Department of Health and Senior Services Vital Statistics and Registration PO Box 370 Trenton, NJ 08625-0370

REQUEST TO PLACE ON FILE A CERTIFICATE OF BIRTH RESULTING IN STILLBIRTH

Per R. S. 26:6-11 the State Registrar shall establish a Certificate of Birth Resulting in Stillbirth for an unintended, intrauterine fetal death occurring within the State of New Jersey after a gestational period of 20 or more weeks upon request by the parents, by completing Section I below. The completed form may be filed with the State Registrar directly by the parents or through a Licensed Health Care Professional who has completed Section II. Completed forms are to be sent to the State Registrar at the address listed above.

Licensed health care professionals include, but are not limited to, the following: the doctor who was present at the time of delivery, the family physician, a bereavement counselor.

Certified copies of certificates of birth resulting in stillbirth are available from the period 1969 to the present. Events which occurred prior to 1969 were not reported and therefore certificates for events prior to 1969 cannot be provided. Parents may indicate in Section I that they wish to purchase certified copies via this request. If certified copies are requested, please remit payment, made payable to "State Registrar" in the amount of \$25.00 for the first certificate and \$2.00 for each additional copy. PLEASE DO NOT SEND CASH! Please allow 4 to 6 weeks for processing of your request; the certificate(s) will be mailed to the address provided in Section I. Future requests for certified copies may be requested at the State Registrar's Office or the Office of Vital Records in the municipality where the event occurred. Please include a photocopy of one of the parents' driver's license as proof of identity.

If the record on file indicates that no name was given, the certificate will be issued in the same manner. Parents who wish to amend the record to add a name may do so by filing a Correction to an Original Birth, Marriage or Death Certificate form (REG-34) with the State Registrar's Office. Copies of the REG-34 form may be obtained from the Local Registrar's Office in your New Jersey municipality, or from the State Registrar's office.

A birth resulting in stillbirth that occurred in the State of New Jersey but has not been registered within one year after the date of delivery may be placed on file and registered as a delayed report, provided that verifiable proof of the delivery is submitted. Certified copies of delayed reports shall be noted as Delayed Certificates of Birth Resulting in Stillbirth.

SECTION I - TO BE COMPLETED BY PARENT(S)						
Name of Parent(s)			Telephone Nu	Imber		
Mailing Address	Ci	ty	Stat	e Zip Code		
Certified Copy Requested? □No □Yes - Quantity:	Signature of Applicant			Date of Application		
INFORMATION ON BIRTH RESULTING IN STILLBIRTH						
Full Name, if Given				Name Not Given		
Place of Delivery (City, Town or	Township)		County			
Date of Delivery	Name of Hospital (Opt	ional)				
Mother's Full Maiden Name		Name of Other Parent (if recorded on the record)				
SECTION II - TO BE C	COMPLETED IF THE FORM IS SUB		LICENSED HEALTH	CARE PROFESSIONAL		
Submitted by (Name of Licensed		Telephone Number				
Title			l			

	FOR STATE USE ONLY					
	ID Viewed:	Processed By:	Date Processed:			
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