

Request for Updated Surrogate Certificate(s)

Please mail your request to:

Ocean County Surrogate Court
P.O. Box 2191
Toms River, NJ 08754

Name _____

Address _____

Phone Number _____

Email Address _____

Name of Deceased _____

Docket Number _____

Date of Death _____

Please Provide me with _____ (*number of updated Surrogate Certificates you are requesting*) updated Surrogate certificates.

Include a check for \$5 for each certificate you need, made payable to the Ocean County Surrogate's Court.