NO_____

Applicant 1
Bride/Groom/Spouse Information
Marriage License Application

Full Name:_____ SS#: ____ - ___ - _____
First Middle Last

Surname after Marriage: _____ Birth Name: _____
(Optional) (If Different)

Address:_____Home Phone #: (____) ____ - _____

City:_____ State:_____ County_____ Zip Code: _____

Is residence within limits of City or Inc. Village? Yes ____ No ____ County_____

Date of Birth: ___ - ___ - ____ Age: _____ Sex (Opt) ____

Birthplace: _____
(City, State, and Country if not USA)

Usual Occupation: _____

Type of Business: _____

Father or Parent Name: _____ Country of Birth: _____
First and Last (maiden if applicable)

Mother or Parent Name: _____ Country of Birth: _____
First and Last (maiden if applicable)

Number of this marriage: _____

How did last marriage end? _____
(Divorce, Annulment, or Death)

Number of previous marriages which ended by:

Divorce: ____ Annulment: ____ Death: ____

Date ended: ___ - ____ - _____

Are any former spouses alive? Yes ____ No ____

You must bring any and all divorce papers from previous marriages with you or a death certificate if a former spouse is deceased.

Date of Decree	Place Issued (City, State/Country if not USA)	Against Whom
___/___/_____	_____	☐ Self / ☐ Spouse
___/___/_____	_____	☐ Self / ☐ Spouse
___/___/_____	_____	☐ Self / ☐ Spouse
___/___/_____	_____	☐ Self / ☐ Spouse

INTERNAL USE ONLY

PROOF OF BIRTH: _____

PROOF OF IDENTITY: _____

NO_____

Applicant 2
Bride/Groom/Spouse Information
Marriage License Application

Full Name:_____ SS#: ____ - ___ - _____
First Middle Last

Surname after Marriage: _____ Birth Name: _____
(Optional) (If Different)

Address:_____Home Phone #: (____) ____ - _____

City:_____ State:_____ County_____ Zip Code: _____

Is residence within limits of City or Inc. Village? Yes ____ No ____ County_____

Date of Birth: ___ - ___ - ____ Age: _____ Sex (Opt) ____

Birthplace: _____
(City, State, and Country if not USA)

Usual Occupation: _____

Type of Business: _____

Father or Parent Name: _____ Country of Birth: _____
First and Last (maiden if applicable)

Mother or Parent Name: _____ Country of Birth: _____
First and Last (maiden if applicable)

Number of this marriage: _____

How did last marriage end? _____
(Divorce, Annulment, or Death)

Number of previous marriages which ended by:

Date ended: ___ - ____ - _____

Divorce: ____ Annulment: ____ Death: ____

Are any former spouses alive? Yes ____ No ____

You must bring any and all divorce papers from previous marriages with you or a death certificate if a former spouse is deceased.

Date of Decree	Place Issued (City, State/Country if not USA)	Against Whom
___/___/_____	_____	☐ Self / ☐ Spouse
___/___/_____	_____	☐ Self / ☐ Spouse
___/___/_____	_____	☐ Self / ☐ Spouse
___/___/_____	_____	☐ Self / ☐ Spouse

INTERNAL USE ONLY

PROOF OF BIRTH: _____

PROOF OF IDENTITY: _____