

Marriage Information Sheet

**COMPLETE FORM AND BRING WITH VALID I.D. AND \$71.00 TO
ANY OF OUR VITAL RECORDS LOCATIONS**

APPLICANT 1: _____		Last Name at Birth _____	
Social Security # _____ (SS# required if born in U.S.)			
Place of Birth: _____			
City		County (Optional)	State
1. Have you ever been married before?		Yes	No
If yes (check one):		Divorced	Widowed
If divorced, for how long? _____ Where (State)? _____			
2. Is the other applicant presently married?		Yes	No
3. Are you presently married?		Yes	No
4. Are you presently delinquent in court-ordered child support?		Yes	No
5. Is the other applicant related to you by blood or adoption?		Yes	No

APPLICANT 2: _____		Last Name at Birth _____	
Social Security # _____ (SS# required if born in U.S.)			
Place of Birth: _____			
City		County (Optional)	State
6. Have you ever been married before?		Yes	No
If yes (check one):		Divorced	Widowed
If divorced, for how long? _____ Where (State)? _____			
7. Is the other applicant presently married?		Yes	No
8. Are you presently married?		Yes	No
9. Are you presently delinquent in court-ordered child support?		Yes	No
10. Is the other applicant related to you by blood or adoption?		Yes	No

Address to mail license after recorded by clerk:			

Street Address	City	State	ZIP

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Telephone Number			