

# Marriage License Application Information

## Applicant 1

Please Check Appropriate Box: Bride  Groom  Spouse

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Last Name on Birth Certificate: \_\_\_\_\_

Birth Place: \_\_\_\_\_ Race: \_\_\_\_\_ Sex \_\_\_\_\_  
(State or Country)

Birthdate: \_\_\_\_\_ Number of this marriage: \_\_\_\_\_  
(1<sup>st</sup>, 2<sup>nd</sup>, etc.)

Current Address: \_\_\_\_\_  
(Number and Street Name)

City: \_\_\_\_\_ County: \_\_\_\_\_ State or Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_ LAST FOUR OF SOCIAL SECURITY \_\_\_\_\_

## Applicant 2

Please Check Appropriate Box: Bride  Groom  Spouse

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Last Name on Birth Certificate: \_\_\_\_\_

Birth Place: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_  
(State or Country)

Birthdate: \_\_\_\_\_ Number of this marriage: \_\_\_\_\_  
(1<sup>st</sup>, 2<sup>nd</sup>, etc.)

Current Address: \_\_\_\_\_  
(Number and Street Name)

City: \_\_\_\_\_ County: \_\_\_\_\_ State or Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_ LAST FOUR OF SOCIAL SECURITY \_\_\_\_\_

### For Office Use Only:

|                                  |             |
|----------------------------------|-------------|
| Date Application was made: _____ | Time: _____ |
| Marriage License No: _____       | _____       |