

MARRIAGE LICENSE APPLICATION

(1) FULL NAME

FIRST MIDDLE LAST

SS# PROOF OF ID#

USUAL RESIDENCE ADDRESS CITY STATE ZIP

DATE OF BIRTH AGE

PLACE OF BIRTH CITY COUNTY STATE

HAVE YOU BEEN DIVORCED IN THE LAST 30 DAYS? YES NO

ARE YOU PRESENTLY MARRIED? YES NO

ARE YOU PRESENTLY DELINQUENT IN THE PAYMENT OF COURT ORDERED CHILD SUPPORT? YES NO

(2) FULL NAME

FIRST MIDDLE LAST

MAIDEN NAME

SS# PROOF OF ID#

USUAL RESIDENCE ADDRESS CITY STATE ZIP

DATE OF BIRTH AGE

PLACE OF BIRTH CITY COUNTY STATE

HAVE YOU BEEN DIVORCED IN THE LAST 30 DAYS? YES NO

ARE YOU PRESENTLY MARRIED? YES NO

ARE YOU PRESENTLY DELINQUENT IN THE PAYMENT OF COURT ORDERED CHILD SUPPORT? YES NO

MAIL MARRIAGE LICENSE TO: