**TOWN OF LAFAYETTE**

Please indicate payment:

□ $40 CASH

□ $40 CHECK #

**MARRIAGE LICENSE**

**APPLICATION INFORMATION FORM**

**PLEASE CHECK ONE:**

 **BRIDE GROOM SPOUSE**

**1. FULL NAME:**

 **FIRST MIDDLE CURRENT SURNAME (LAST NAME)**

**2. SOCIAL SECURITY NUMBER:**

**3. SURNAME (last name) YOU WILL TAKE AFTER MARRIAGE:**

**4. MIDDLE NAME AFTER MARRIAGE (IF CHANGING):**

**5. BIRTH NAME, IF DIFFERENT:**

**6. ADDRESS:**

**7. ADDRESS AFTER MARRIAGE (TO MAIL MARRIAGE CERTIFICATE TO):**

**8. SPECIFY THE NAME OF THE MUNICIPALITY/JURISDICTION YOU LIVE IN:**

**TOWN: VILLAGE: CITY:**

**9. PHONE NUMBER: 10. CELL PHONE:**

**11. IS RESIDENCE WITHIN LIMITS OF INCORPORTATED VILLAGE OR CITY? Yes/No (circle)**

**12. SPECIFY THE NAME OF COUNTY YOU LIVE IN:**

**13. DATE OF BIRTH: / /**

**14. PLACE OF BIRTH: (City, state/country if not USA)**

**15. USUAL OCCUPATION: TYPE OF BUSINESS:**

**PARENT'S INFORMATION:** (**EXACTLY AS IT APPEARS ON YOUR BIRTH CERTIFICATE)**

FA THER 'S FULL NAME:

FATHER'S COUNTRY OF BIRTH:

MOTHER'S FULL NAME:

MOTHER'S COUNTRY OF BIRTH:

**TURN PAGE**

**PREVIOUS MARRIAGES: *Please note that you must furnish proof that a previous marriage has been dissolved by showings all certified copy of a divorce decree, certificate of dissolution of marriage, or other certified document that would indicate you are no longer married.***

WHAT NUMBER OF MARRIAGE IS THIS?

NUMBER OF PREVIOUS MARRIAGES, WHICH ENDED BY:

DIVORCE: ANNULMENT: DEATH:

HOW DID LAST MARRIAGE END?

DIVORCE: ANNULMENT: DEATH:

DATE LAST MARRIAGE ENDED? : / /

ARE ANY FORMER SPOUSE(S) ALIVE? Yes No (circle)

IF PREVIOUSLY DIVORCED. PROVIDE THE FOLLOWING INFORMATION:

DATE OF DECREE PLACE ISSUEDAGAINST WHOM

(Month/Day/Year) (City, State/Country if not USA) SELF or SPOUSE

1st:

2nd:

3rd:  :

"I, , BEING DULY SWORN, DEPOSE AND SAY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT AS TO MY RIGHT TO ENTER INTO THE MARRIAGE STATE, THE INFORMATION I PROVIDED IS TRUE AND THAT I DECLARE THAT NO LEGAL IMPEDIMENT EXISTS."

SIGNATURE: DATE:

**Spouse #2 Documentation**

**CIRCLE**

**Proof of Age: Birth Cert / Baptismal Record / Naturalization Record/ Census Record**

**Proof of ID: Driver’s License / Passport / Immigration Record / Employment Picture ID**

**Documented Divorce: Yes / No**

**Spouse #1 Documentation**

**CIRCLE**

**Proof of Age: Birth Cert / Baptismal Record / Naturalization Record/ Census Record**

**Proof of ID: Driver’s License / Passport / Immigration Record / Employment Picture ID**

**Documented Divorce: Yes / No**

Date to be Married: Officiant:

**DATE TO BE MARRIED:**

**LOCATION:**

**WHO WILL PERFORM THE MARRIAGE?**

Location: