TOWN OF TULLY MARRIAGE LICENSE APPLICATION INFORMATION FORM

APPLICATION INFORMATION FORM PLEASE CHECK ONE: RRIDE GROOM SE

BRIDEGROOMSPOUSE					
1. FULL NAME:					
2. SOCIAL SECURITY NUMBER:					
3. SURNAME (LAST NAME) YOU WILL TAKE AFTER MARRIAGE:					
4. BIRTH NAME, IF DIFFERENT:					
5. ADDRESS:					
6. ADDRESS AFTER MARRIAGE (TO MAIL MARRIAGE CERTIFICATE TO):					
7. SPECIFY THE NAME OF THE MUNICIPALITY/JURISDICTION YOU LIVE IN: TOWN:					
8. PHONE NUMBER: 9. CELL PHONE:					
10. IS RESIDENCE WITHIN LIMITS OF INCORPORTATED VILLAGE OR CITY? YES/NO (CIRCLE)					
11. SPECIFY THE NAME OF COUNTY YOU LIVE IN:					
12. DATE OF BIRTH:/					
13.PLACE OF BIRTH:					
(CITY, STATE/COUNTRY IF NOT USA)					
14. USUAL OCCUPATION: TYPE OF BUSINESS:					
PARENT'S INFORMATION: (EXACTLY AS IT APPEARS ON YOUR BIRTH CERTIFICATE)					
FATHER'S FULL NAME:					
FATHER'S COUNTRY OF BIRTH:					
MOTHER'S FULL NAME:					
MOTHER'S COUNTRY OF BIRTH:					

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 DIVORCE: ANNULMENT:	H ENDED BY: DEATH:			
HOW DID LAST MARRIAGE END? DIVORCE: ANNULMENT:				
DATE LAST MARRIAGE ENDED? ://				
ARE ANY FORMER SPOUSE(S) ALIVE? YES IN	lo (circle)			
IF PREVIOUSLY DIVORCED. PROVIDE THE FOUNDATE OF DECREE PLACE ISSUE WHOM	OLLOWING INFORMATION:			
2ND:				
3ª:				
"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 #1 DOCUMENTATION CIRCLE PROOF OF AGE: BIRTH CERT / BAPTISMAL, RECORD / NATURALIZATION RECORD / CENSUS RECORD PROOF OF ID: DRIVERS LICENSE / PASSPORT / IMMIGRATION RECORD / EMPLOYMENT PICTURE ID DOCUMENTED DIVORCE: YES / NO	SPOUSE #2 DOCUMENTATION CIRCLE PROOF OF AGE: BIRTH CERT / BAPTISMAL RECORD / NATURALIZATION RECORD / CENSUS RECORD PROOF OF ID: DRIVERS LICENSE / PASSPORT / IMMIGRATION RECORD / EMPLOYMENT PICTURE ID DOCUMENTED DIVORCE: YES / NO			
DATE TO BE MARRIED:C				

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PLEASE CHECK ONE:

	BRIDE	GF	ROOM	SPOUSE		
1. FULL NAME:				NT SURNAME (LAST NAME)		
2. SOCIAL SECURITY NUMBER:						
3. SURNAME (LAST NAME) YOU WILL TAKE AFTER MARRIAGE:						
4. BIRTH NAME, IF DIFFERENT:						
6. ADDRESS AFT	ER MARRIA	GE (TO MAIL	_ MARRIA	GE CERTIFICATE TO):		
IN:				IURISDICTION YOU LIVE		
IOWN:	VILL	AGE:		CITY:		
8. PHONE NUMB	BER:	·	_ 9. CEL	L PHONE:		
10. IS RESIDENCE WITHIN LIMITS OF INCORPORTATED VILLAGE OR CITY? YES/NO (CIRCLE)						
11. SPECIFY THE NAME OF COUNTY YOU LIVE IN:						
12. DATE OF BIR	RTH:		_			
13. PLACE OF BIRTH:						
			E/COUNTR	RY IF NOT USA)		
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MOTHER'S FULL NAME:						
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WHAT NUMBER OF MARRIAG	E				
NUMBER OF PREVIOUS MARRIAGES, WHICH ENDED BY: DIVORCE: ANNULMENT: DEATH:					
HOW DID LAST MARRIAGE ENDIVORCE: ANNULME	ND?				
DATE LAST MARRIAGE ENDED?:					
ARE ANY FORMER SPOUSE(S) ALIVE? YES NO (CIRCLE)					
IF PREVIOUSLY DIVORCED. P DATE OF DECREE WHOM (MONTH/DAY/YEAR) SPOUSE 1 ST :	PLACE ISSUED	NG INFORMATION: AGAINST IF NOT USA) SELF OR			
2 ND :					
3™:					
"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:	DA	TE:			
SPOUSE #1 DOCUMENTATION CIRCLE PROOF OF AGE: BIRTH CERT / BARECORD / NATURALIZATION RECENSUS RECORD PROOF OF ID: DRIVERS LICEN PASSPORT / IMMIGRATION RECENPLOYMENT PICTURE ID DOCUMENTED DIVORCE: YES	ON APTISMAL PROJECT CORD PROOF ORD PROOF / IM / NO D	SPOUSE #2 DOCUMENTATION CIRCLE OF OF AGE: BIRTH CERT / BAPTISMAL CORD / NATURALIZATION RECORD/ CENSUS RECORD FOF ID: DRIVERS LICENSE / PASSPORT MIGRATION RECORD / EMPLOYMENT PICTURE ID OCUMENTED DIVORCE: YES / NO			
DATE TO BE MARRIED: LOCATION:	OFFICIANT	·			