

**New Jersey Department of Health and Senior Services
APPLICATION FOR MARRIAGE LICENSE**

(PLEASE PRINT OR TYPE)

DECLARATION OF MALE APPLICANT <i>(Giving false information constitutes perjury.)</i>			DECLARATION OF FEMALE APPLICANT <i>(Giving false information constitutes perjury.)</i>		
1. Name (First, Middle, Last)			1. Name (First, Middle, Maiden Name)		
Street Address <i>(Current Legal Residence)</i> (City, Borough, Twp) <i>(See Note 1)</i>			Street Address <i>(Current Legal Residence)</i> (City, Borough, Twp) <i>(See Note 1)</i>		
County <i>(See Note 4)</i>		State	County <i>(See Note 4)</i>		State
Zip Code			Zip Code		
2. Birthdate	3. Age <i>(See Note 2)</i>		1a. Current Name <i>(if different)</i>	2. Birthdate	3. Age <i>(See Note 2)</i>
4. Birthplace			4. Birthplace		
5. Marital Status (at time of this marriage) <i>(See Notes 3 and 5)</i>			5. Marital Status (at time of this marriage) <i>(See Notes 3 and 5)</i>		
<input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Annulled			<input type="checkbox"/> Never Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Annulled		
Date		Place	Date		Place
_____		_____	_____		_____
_____		_____	_____		_____
_____		_____	_____		_____
6. Number of Times Previously Married <i>(if applicable)</i>		7. Race	6. Number of Times Previously Married <i>(if applicable)</i>		7. Race
8. Maiden Name of Most Recent Wife <i>(if any)</i>			8. Name of Most Recent Husband <i>(if any)</i>		
9a. Father's Full Name		9b. Birthplace	9a. Father's Full Name		9b. Birthplace
10a. Mother's Full Maiden Name		10b. Birthplace	10a. Mother's Full Maiden Name		10b. Birthplace
11. Are you related to the Bride? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES," how:			11. Are you related to the Groom? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES," how:		
12. Are you infected with Venereal Disease in a communicable stage? <input type="checkbox"/> Yes <input type="checkbox"/> No			12. Are you infected with Venereal Disease in a communicable stage? <input type="checkbox"/> Yes <input type="checkbox"/> No		
INFORMATION TO BE COMPLETED BY EITHER MALE OR FEMALE APPLICANT					
1. In which Incorporated Municipality in New Jersey do you intend to be married? <i>(See Note 4)</i>		2. Intended Date of Marriage		3. Telephone Number where either party can now be reached.	
4. Name and mailing address of person who is to perform the marriage.			5. Mailing Address where you may be reached after marriage.		

NOTE 1. This is the permanent home and principal establishment to which, when absent, the applicant intends to return.

NOTE 2. Written consent of both parents is required for the marriage of any person under eighteen years of age. In addition, if any person is under sixteen, the consent of the parents must be approved in writing by a judge of the Superior Court, Chancery Division, Family Part. Consent of parents is required for the remarriage of a minor previously married to the same mate in another state.

NOTE 3. When a remarriage license is requested, adjust 5 for the male and female applicant to show that the parties are already married. It is required that proof of the previous marriage be submitted to you. Common law marriages which were legal prior to December 1, 1939 must be established by affidavit showing the

place and date of the common law marriage contract. The place and date of the previous marriage should be stated on both the application and the license. The seventy-two hour waiting period is waived in remarriage cases. Consent of parents is required for the remarriage of a minor previously married to the same mate in another state.

NOTE 4. If both applicants are nonresidents of New Jersey, the marriage must occur where license is issued. Registrar should so mark license.

NOTE 5. The Registrar's use of a divorce decree submitted with this application in no way implies its validity. Such a determination can only be reached in a court of law.

Continue with Declaration of Identifying Witness and Oath.

UPON COMPLETION, APPLICATION IS TO BE RETAINED AS A PERMANENT RECORD.

DECLARATION OF IDENTIFYING WITNESS

(Giving false information constitutes perjury)

1. Name and Address

Form with fields for Name (First, Middle, Last), Street, City, Borough, Township, County, State, and Zip Code.

2. How long have you known each applicant? Male _____ Female _____

3. Have the applicants correctly stated their ages and usual residences? [] Yes [] No

4. Do you know of any legal impediment to their marriage? [] Yes [] No If "Yes" - Explain:

OATH OR AFFIRMATION OF APPLICANTS AND IDENTIFYING WITNESS

NOTE TO REGISTRAR - Applicants and witness should be told that taking a false oath constitutes perjury, which is punishable by a maximum fine of \$7,500.00. In any case where application is made by only one party to begin the waiting period, the same identifying witness must return when the second party completes the application. In such a case the same witness must sign once again on the line below that on which he/she signed when appearing with the first party.

We, who have hereunder signed our names, do solemnly swear (or affirm) that we are not currently ruled mentally incompetent, the answers given by us in this application for a marriage license are true, full and perfect answers to each and all of said questions.

(Signature of Male Applicant) _____ (Date) _____

(Signature of Female Applicant) _____ (Date) _____

Signature of Witness _____ Date) _____

(Second Signature of Same Witness, if necessary) _____ (Date) _____

Sworn (or affirmed) and subscribed before me at _____

this _____ day of _____, 20 _____ at _____ AM _____ PM

(Registrar)

REGISTRAR - DO NOT insert place and date of marriage or file the application until either the completed marriage certificate or copy thereof is sent to you. Follow-up on all licenses for completion.

License number _____ issued _____ (Date of Issue)

Marriage performed in _____ (City, Borough, Township) on _____ (Date)

APPLICANTS FOR A NEW JERSEY MARRIAGE LICENSE MUST PROVIDE THEIR SOCIAL SECURITY NUMBERS (TITLE 37:1-17)

Form with two columns for Social Security Number of Groom and Social Security Number of Bride, each with a grid for digits.

Social Security Numbers shall be kept confidential and may only be released for child support purposes and shall not be considered a public record pursuant to P.L. 1963, C.73 (C.47:1A-1 et seq.)