

For Office Use Only:

Application No.

Application number grid

MARRIAGE APPLICATION

FEE

Fee amount grid

SECTION A: SPOUSE INFORMATION

SECTION B: SPOUSE INFORMATION

LAST NAME:

Last name grid for Section A

LAST NAME:

Last name grid for Section B

FIRST NAME:

First name grid for Section A

FIRST NAME:

First name grid for Section B

MIDDLE NAME:

Middle name grid for Section A

MIDDLE NAME:

Middle name grid for Section B

SUFFIX: JR., SR., II OR III IF APPLICABLE:

Suffix grid for Section A

MAIDEN NAME:

Maiden name grid for Section B

CITY OF RESIDENCE:

COUNTY OF RESIDENCE:

STATE OF RESIDENCE: STATE OF BIRTH

DATE OF BIRTH:

Date of birth grid for Section A

DATE OF BIRTH:

Date of birth grid for Section B

RACE: U.S. CITIZEN? YES NO

SOCIAL SECURITY #

HAVE YOU EVER BEEN MARRIED? YES NO

IF MARRIED BEFORE HOW MANY TIMES?

LAST MARRIAGE ENDED BY: DIVORCE ANNULMENT DEATH

DATE LAST MARRIAGE ENDED:

Date last marriage ended grid for Section A

CITY OF RESIDENCE:

COUNTY OF RESIDENCE:

STATE OF RESIDENCE: STATE OF BIRTH

DATE OF BIRTH:

Date of birth grid for Section B

RACE: U.S. CITIZEN? YES NO

SOCIAL SECURITY #

HAVE YOU EVER BEEN MARRIED? YES NO

IF MARRIED BEFORE HOW MANY TIMES?

LAST MARRIAGE ENDED BY: DIVORCE ANNULMENT DEATH

DATE LAST MARRIAGE ENDED:

Date last marriage ended grid for Section B

SECTION C: STATEMENT

We, [SPOUSE NAME] & [SPOUSE NAME]

attest that we separately or together have [ ] or have not [ ] Obtained and read or otherwise accessed the information contained in the handbook or other electronic media presentation of rights and responsibilities of parties to a marriage specified in Florida Statute 741.0306. We separately or together have [ ] or have not [ ] completed a premarital preparation course.

SPOUSE SIGNATURE

DATE

SPOUSE SIGNATURE

DATE

SECTION D: ADDRESS TO MAIL YOUR CERTIFIED COPY OF THE MARRIAGE LICENSE

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE NUMBER