

# APPLICATION FOR MARRIAGE LICENSE

## STATE OF MINNESOTA, COUNTY OF DAKOTA

(Marriage must be performed within the geographical boundaries of Minnesota within six months from the date of the license.)

First Applicant

Second Applicant

NAME (Last)	(First)	(Middle)	Number of previous marriages
ADDRESS (Number and Street)			How last marriage terminated (Death, Divorce or Legal Annulment)
CITY	COUNTY	STATE ZIP	
PLEASE CHECK ONE: <input type="checkbox"/> My Social Security # is: _____ <input type="checkbox"/> I certify that I do not have a Social Security # (Signature Required): _____			Date of termination
DAYTIME PHONE	AGE	BIRTHDATE	GENDER
PREVIOUS MARRIED NAME (Last)			County of termination
(First)		(Middle)	City and state of termination

Does First Applicant have a felony conviction for a crime committed on or after August 1, 2000 under MN law or the law of another state or federal jurisdiction?  No  Yes If yes, what jurisdiction?

NAME (Last)	(First)	(Middle)	Number of previous marriages
ADDRESS (Number and Street)			How last marriage terminated (Death, Divorce or Legal Annulment)
CITY	COUNTY	STATE ZIP	
PLEASE CHECK ONE: <input type="checkbox"/> My Social Security # is: _____ <input type="checkbox"/> I certify that I do not have a Social Security # (Signature Required): _____			Date of termination
DAYTIME PHONE	AGE	BIRTHDATE	GENDER
PREVIOUS MARRIED NAME (Last)			County of termination
(First)		(Middle)	City and state of termination

Does Second Applicant have a felony conviction for a crime committed on or after August 1, 2000 under MN law or the law of another state or federal jurisdiction?  No  Yes If yes, what jurisdiction?

Are the applicants related to each other by either blood or adoption?	If yes, what is the relationship?	If either of the applicants is under 18 years of age, give the name and address of his/her legal custodial parent or guardian.	NAME
			ADDRESS

Notice: A person who has a felony conviction for a crime committed on or after August 1, 2000 under Minnesota law or the law of another state or federal jurisdiction may not use a different name after marriage except as authorized by Minnesota Statute 259.13, and doing so is a gross misdemeanor.

Complete names of the applicants AFTER MARRIAGE	First Applicant (Last)	(First)	(Middle)
	Second Applicant (Last)	(First)	(Middle)
Address the applicants will have AFTER MARRIAGE	ADDRESS (Number and Street)		
	CITY	STATE	ZIP

**STOP HERE – You must take the oath in front of a Local Registrar before signing.**

**OATH:** We, the undersigned, hereby apply for a license to marry and declare upon oath that all of the above answers and statements of fact are true and correct; that neither of us has a spouse living; and that neither is committed to the guardianship or conservatorship of the commissioner of human services for reason of developmental disability and that there will be no legal impediment to this marriage on the date the license is valid.

SIGNATURE OF FIRST APPLICANT \_\_\_\_\_

SIGNATURE OF SECOND APPLICANT \_\_\_\_\_

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_

Joel T. Beckman By \_\_\_\_\_

County Treasurer-Auditor Deputy

OFFICE USE ONLY	
Date License Issued	<input type="checkbox"/> Mail
	<input type="checkbox"/> Pick-up
Premarital Ed	Supplemental
Y N	No 1 2

TENNESSEN WARNING FOR THE COLLECTION OF SOCIAL SECURITY NUMBERS: If you have a social security number, you are required by federal and state law to put it on the marriage license application (Title 42, US code, sec 666(A) (13) (a)), MN Statutes, sec. 144.223, and MN Statutes, sec. 517.08, subd. 1a (1997). Your social security number is reported to the MN Dept of Health and will be kept private. If necessary your social security number may be used to help obtain financial support of your child..