For Office Use Only:

Application No. ☐☐☐☐ - ☐☐ - ☐☐☐☐☐☐ - ☐

Application Date ☐☐ ☐☐ ☐☐☐☐

MM DD YYYY

SECTION A: GROOM'S INFORMATION

LAST NAME:

FIRST NAME:

MIDDLE NAME:

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

CITY OF RESIDENCE: _____

COUNTY OF RESIDENCE: _____

STATE OF RESIDENCE: _____ *STATE OF BIRTH:* _____

DATE OF BIRTH: MONTH: |__|__| DAY: |__|__| YEAR: |__|__|__|__|

RACE: _____ *U.S. CITIZEN?* ☐ *YES* ☐ *NO*

SOCIAL SECURITY #: _____
Or Alien Registration Number

HAVE YOU EVER BEEN MARRIED? ☐ *YES* ☐ *NO*

IF MARRIED BEFORE, HOW MANY TIMES? _____

LAST MARRIAGE ENDED BY: DIVORCE ☐ *ANNULMENT* ☐ *DEATH* ☐

DATE LAST MARRIAGE ENDED:
MONTH: |__|__| DAY: |__|__| YEAR: |__|__|__|__|:

SECTION B: BRIDE'S INFORMATION

LAST NAME:

FIRST NAME:

MIDDLE NAME:

MAIDEN NAME:

CITY OF RESIDENCE: _____

COUNTY OF RESIDENCE: _____

STATE OF RESIDENCE: _____ *STATE OF BIRTH:* _____

DATE OF BIRTH: MONTH: |__|__| DAY: |__|__| YEAR: |__|__|__|__|

RACE: _____ *U.S. CITIZEN?* ☐ *YES* ☐ *NO*

SOCIAL SECURITY #: _____
Or Alien Registration Number

HAVE YOU EVER BEEN MARRIED? ☐ *YES* ☐ *NO*

IF MARRIED BEFORE, HOW MANY TIMES? _____

LAST MARRIAGE ENDED BY: DIVORCE ☐ *ANNULMENT* ☐ *DEATH* ☐

DATE LAST MARRIAGE ENDED:
MONTH: |__|__| DAY: |__|__| YEAR: |__|__|__|__|

SECTION C: STATEMENT

We, _____ *&* _____ *attest that we separately or*
GROOM'S NAME *BRIDE'S NAME*

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.*

_____ _____ _____ _____
GROOM'S SIGNATURE *DATE* *BRIDE'S SIGNATURE* *DATE*

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

_____ _____
STREET ADDRESS *CITY, STATE, ZIP* *AREA CODE & PHONE NUMBER*

NO REFUNDS NO PERSONAL CHECKS ACCEPTED