## New Jersey Department of Health APPLICATION FOR LICENSE

☐ MARRIAGE ☐ REMARRIAGE

_	~ II	/11	111	1101
- 1		/ 11	UIN	IION

☐ REAFFIRMATION OF CIVIL UNION

(PLEASE PRINT OR TYPE)

<b>DECLARATION OI</b> (Giving false information	_	DECLARATION OF APPLICANT B (Giving false information constitutes perjury.)					
Name (First, Middle, Last)     (List name given at birth or on birth certification)	icate/Maiden name)	Name (First, Middle, Last)     (List name given at birth or on birth cert.)	Name (First, Middle, Last)     (List name given at birth or on birth certificate/Maiden name)				
Street Address (Current Legal Residence	e) (See Note 1) County	Street Address (Current Legal Residence	Street Address (Current Legal Residence) (See Note 1) County				
Municipality of Residence (See Note 4) State Zip Code		Municipality of Residence (See Note 4) State Zip Code					
1a. Current Name (if different)  2. Date of Birth		1a. Current Name (if different)  2. Date of Birth					
3. Birthplace	4. Sex M F F S. Age (See Note 2) Undesignated/Non-Binary	3. Birthplace	4. Sex M F 5. Age Undesignated/ Non-Binary				
6. Domestic Status (at this time) (See Notes Date Single	s 3 and 5) Place	6. Domestic Status (at this time) (See Note Date	s 3 and 5) Place				
☐Widowed ☐Divorced ☐Annulled ☐Current Domestic	-	_					
Partner  Former Domestic  Partner	-	Partner  Partner  Former Domestic  Partner	_				
Current Civil Union Partner		Current Civil Union Partner					
∐Former Civil Union Partner		☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐					
For Remarriage to the same spouse, or F same partner, enter date and place of original Date    Marriage		For Remarriage to the same spouse, or Reaffirmation of Civil Union to the same partner, enter date and place of original ceremony:    Marriage   Date   Place					
	f Most Recent Spouse (if any) (List na th or on birth certificate/Maiden name)		of Most Recent Spouse (if any) (List name the or on birth certificate/Maiden name):				
	me given at birth or on birth certificate/		of Most Recent Civil Union Partner (if any) me given at birth or on birth certificate/ name):				
9a. Parent's Full Name at Birth	9b. Birthplace	9a. Parent's Full Name at Birth	9b. Birthplace				
10a. Parent's Full Name at Birth	10b. Birthplace	10a. Parent's Full Name at Birth	10b. Birthplace				
11. Are you related to Applicant B? If "YES," how?	□Yes □No	11. Are you related to Applicant A? If "YES," how?	☐Yes ☐No				
	INFORMATION TO BE COM	IPLETED BY <i>EITHER</i> APPLICANT					
12. In which Incorporated Municipality in New to be performed? (See Note 4)			14. Telephone Number where either applicant can now be reached:				
15. Name and mailing address of person who	o is to perform the ceremony:	16. Mailing Address where you may be read	hed after the ceremony:				

## ${\it UPON COMPLETION, APPLICATION IS\ TO\ BE\ RETAINED\ AS\ A\ PERMANENT\ RECORD.}$

## **DECLARATION OF IDENTIFYING WITNESS**

(Giving false information constitutes perjury)

		, -	: IIIIOITTIAIIOTT COTISIIIUI	es perjury)				
1.	Name (First, Middle, Last):							
	Mailing Address (Street/PC	) Box):						
	City:			State:	ZiĮ	o Code:		
2.	Have the applicants correct	tly stated their ages and	usual residences?		□Yes	□No		
3.	<ol> <li>Did the applicants make you aware of any legal impediment marriage / remarriage / civil union / reaffirmation of civil unio</li> </ol>				□Yes	□No		
	If "Yes, " explain:							
	OATH OR	AFFIRMATION OF	APPLICANTS A	ND IDE	NTIFYING	WITNESS		
	NOTE TO REGISTRAR - Appli maximum fine of \$7,500.00. I identifying witness must return v again on the line below that on	n any case where applica when the second applicant	ation is made by only t completes the applic	y one appl cation. In s	licant to begir uch a case th	the waiting pe	eriod, the same	
	We, who have hereunder sign the answers given by us in this full and perfect answers to each	s application for a marria	ige, remarriage, civil					
	Signature of Applicant A:				Date:			
	Signature of Applicant B:				Date:			
	Signature of Witness:				Date:			
	Second Signature of Witness (if necessary):				Date:			
	Sworn (or affirmed) and su	ubscribed before me at						
	this	day of	, 20	at		AM	PM	
	Signature of Registrar:							
	REGISTRAR - DO NOT ins thereof is sent to you. Follo			lication unt	il either the co	ompleted certific	cate or copy	
	License Number:		Date	of Issue:				
	Ceremony Performed in (C	City, Borough, Twp.):						
	Date of Ceremony:							
wh NC tim NC req or ma wh affii	DTE 1. This is the permanent hor ich, when absent, the applicant into DTE 2. Both applicants must be a re of application.  DTE 3. When a remarriage or read quested, indicate in Question 6 that joined in a civil union. It is recurriage or civil union be submitted ich were legal prior to December idavit showing the place and daintract. The place and date of the buld be stated on both the applicate	rends to return.  minimum of 18 years of age  iffirmation of civil union lice at the parties are already m  puired that proof of the pri  to you. Common law marr  1, 1939, must be establish te of the common law mare  previous marriage or civil	the rem joined ir NOTE 4 Inse is physical nonresid evious municipalities, and by NOTE 5 Interest of the physical nonresid municipalities, mark the led by NOTE 5 Interest of the rem joined in the rem joined in the rem joined in the physical interest of the physical intere	arriage or r a a marriage . Municipal lly resides, dents of Ne ality where e license ac . The Regis or terminati	eaffirmation of or civil union to ity of residence not the mailing when Jersey, the the ceremony cordingly.  trar's review of on of Domest ay implies the	a civil union of to the same parti- e is the municipa g address. If application mu will be performe a divorce decre- ic Partnership,	arents is required for a minor previously ner in another state ality where applicant both applicants are ust be made in the d. Registrar should be, dissolution of Civic submitted with this ubmitted document of law.	ly e. nt re le ld /il
Car		ANTS MUST PROVIDE TH				<u> </u>		
30C	ial Security Number of Applicant A	`  -	Social Sect	unty Numbe	r of Applicant E	-		
	Cosial Converte M		dontial and may and the	o rologged	for child core :			
		Numbers shall be kept confi shall not be considered a p						