

INTENTION OF MARRIAGE

INSTRUCTIONS: Please type or clearly print with *black ink*. Complete every item carefully, sign the certification statement, and return an application to the municipality in which at least one applicant resides. If neither applicant is a Maine resident, return the application to any municipality. The License and Certificate of Marriage will be prepared from the information on this form. It is valid only for marriages performed in the State of Maine.

| GROOM SECTION | | | | | | |
|--|--|---|------------------------------------|--|--|---|
| 1a. FIRST NAME | | 1b. MIDDLE NAME | | 1c. LAST NAME | | 1d. JR., ETC. |
| 2. AGE LAST BIRTHDAY | 3. RESIDENCE - State | 4. COUNTY | | 5. CITY OR TOWN | | |
| 6. STREET AND NUMBER | | | | 7. BIRTHPLACE (State or Foreign Country) | | 8. DATE OF BIRTH (Mo., Day, Yr.) |
| 9. FATHER'S NAME (First, Middle Initial, Last) | | 10. BIRTHPLACE (State or Foreign Country) | | 11. MOTHER'S NAME (First, Middle Initial, Maiden Surname) | | 12. BIRTHPLACE (State or Foreign Country) |
| BRIDE SECTION | | | | | | |
| 13a. FIRST NAME | | 13b. MIDDLE NAME | | 13c. MAIDEN SURNAME | | 14. CURRENT LAST NAME |
| 15. AGE LAST BIRTHDAY | 16. RESIDENCE - State | 17. COUNTY | | 18. CITY OR TOWN | | |
| 19. STREET AND NUMBER | | | | 20. BIRTHPLACE (State or Foreign Country) | | 21. DATE OF BIRTH (Mo., Day, Yr.) |
| 22. FATHER'S NAME (First, Middle initial, Last) | | 23. BIRTHPLACE (State or Foreign Country) | | 24. MOTHER'S NAME (First, Middle Initial, Maiden Surname) | | 25. BIRTHPLACE (State or Foreign Country) |
| MARITAL STATUS SECTION | | | | | | |
| GROOM | | BRIDE | | | | |
| Number of This Marriage | 27. If Previously Married, Last Marriage Ended | | | Number of This Marriage | 29. If Previously Married, Last Marriage Ended | |
| 26. First, Second, etc. (Specify) | <input type="checkbox"/> DEATH | <input type="checkbox"/> DIVORCE | <input type="checkbox"/> ANNULMENT | | 28. First, Second, etc. (Specify) | <input type="checkbox"/> DEATH |
| | <input type="checkbox"/> DIVORCE | <input type="checkbox"/> ANNULMENT | | | <input type="checkbox"/> DIVORCE | <input type="checkbox"/> ANNULMENT |
| | DATE: (Mo., Day, Yr.): _____ / _____ / _____ | | | | DATE: (Mo., Day, Yr.): _____ / _____ / _____ | |
| | NAME OF FORMER SPOUSE: _____ | | | | NAME OF FORMER SPOUSE: _____ | |
| Is groom currently a registered domestic partner? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | Is bride currently a registered domestic partner? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| LOCATION/NAME OF COURT: _____ | | | | LOCATION/NAME OF COURT: _____ | | |

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I AM FREE TO MARRY UNDER THE LAWS OF MAINE.

» _____
Signature of Groom
Telephone Number (optional): _____

» _____
Signature of Bride
Telephone Number (optional): _____

Personally appeared before me the above named and made oath to the truth and foregoing statement:

» _____
(Signature of Notary Public/Municipal Clerk)

» _____
(Signature of Notary Public/Municipal Clerk)

My term expires: _____

My term expires: _____

State of _____

State of _____

County of _____

County of _____

Town/City of _____

Town/City of _____

| | |
|---|--|
| Marriage is planned to take place on _____ at _____ | |
| Date (Mo., Day, Yr.) | |
| Officiant (if known) will be: _____ | Title: _____ |
| | (Religious/Civil) Telephone # (optional) |
| Officiant's Address _____ | |
| Street | City |
| State | Zip Code |

DO NOT WRITE BELOW THIS LINE – MUNICIPAL CLERK USE ONLY

Social Security requirement has been met: yes no Date Intentions Filed (Mo., Day, Yr.): _____