

DATE of WEDDING:

OUR FILE NO. \_\_\_\_\_

Livingston County Clerk – Vital Records

Marriage License Application Worksheet

This form is used for accuracy of information and spelling purposes. The State of Michigan requires that each applicant be responsible for information given and contained herein.

~ **PLEASE PRINT CLEARLY** ~

**APPLICANT 1**

MALE / FEMALE  
(circle one)

Full Name (First, Middle, Last)

Your Social Security Number

Your Last Name on your Birth Certificate

Your Age Today

Date of Birth

Your Birthplace (City and State-on your birth certificate)

Street Address *on your Driver's License*

City, State and Zip Code *on Driver's License*

Residence County

Times Previously Married

Parent 1 Full Name TODAY (1<sup>ST</sup>, Middle, Last)

Parent 1 Full Name at *THEIR* Birth (Surname) **State of Birth**

Parent 2 Full Name TODAY (1<sup>ST</sup>, Middle, Last)

Parent 2 Full Name at *THEIR* Birth (Surname) **State of Birth**

YOUR PHONE NUMBER

**APPLICANT 2**

MALE / FEMALE  
(circle one)

Full Name (First, Middle, Last)

Your Social Security Number

Your Last Name on your Birth Certificate

Your Age Today

Date of Birth

Your Birthplace (City and State-on your birth certificate)

Street Address *on your Driver's License*

City, State and Zip Code *on Driver's License*

Residence County

Times Previously Married

Parent 1 Full Name TODAY (1<sup>ST</sup>, Middle, Last)

Parent 1 Full Name at *THEIR* Birth (Surname) **State of Birth**

Parent 2 Full Name TODAY (1<sup>ST</sup>, Middle, Last)

Parent 2 Full Name at *THEIR* Birth (Surname) **State of Birth**

YOUR PHONE NUMBER

**OFFICE USE ONLY:** Date: \_\_\_\_\_ BCx2 \_\_\_\_\_ SSx2 \_\_\_\_\_ DL/STATE IDx2 \_\_\_\_\_ Clerk Initials: \_\_\_\_\_