DO NOT SIGN APPLICATION

MARRIAGE LICENSE APPLICATION
LAKE COUNTY PROBATE COURT ***Case No. 17 ML _____***

APPLICANT 1	***APPLICANT 2***
Full Name Last First Middle	Full Name Last First Middle
Have you ever been known by any other name?: (List all)	Have you ever been known by any other name?: (List all)
Address: City State Zip	Address: City State Zip
County of Residence:	County of Residence:
Date of Birth:	Date of Birth:
SSN:	SSN:
Phone Number:	Phone Number:
Birthplace City: State:	Birthplace City: State:
Occupation:	Occupation:
Father's Full Name:	Father's Full Name:
Mother's Full Maiden Name:	Mother's Full Maiden Name:
Who is expected to perform your ceremony? Name: Phone Number:	
PREVIOUS MARRIAGES	
Previously married: (number of times):	Previously married: (number of times):
Date of last Divorce/Dissolution/Death of spouse:	Date of last Divorce/Dissolution/Death of Spouse:
Case No.	Case No.
County and State:	County and State:
Name of former spouse:	Name of former spouse:
Names of Children 17 or under from prior marriage: (include ages)	Names of Children 17 or under from prior marriage: (include ages)

That neither of the parties is under the influence of any intoxicating liquor or narcotic drug; that if the applicant is under 18 years of age, marriage counseling has been received; that the parties are not nearer of kin than second cousins; that there is no legal impediment to their marriage and that all of the above statements are true.

Applicant 1	**Applicant 2**

Sworn to before me and signed in my presence, this _____ day of _____, 2017.

_____
Deputy Clerk

☐ Last Divorce/Dissolution Decree exhibited ☐ Counseling Proof & Necessary consents on file

Revised 01/2015