

# **PROBATE COURT OF LAKE COUNTY OHIO**

## **JUDGE MARK J. BARTOLOTTA**

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### **HOW TO OBTAIN A CERTIFIED COPY OF A MARRIAGE LICENSE**

Please note, marriage records are on file at the Lake County Probate Court if at least one of the applicants resided in Lake County at the time of marriage. If BOTH applicants did not reside in Ohio, and the marriage ceremony was performed in Lake County, Ohio, the marriage license can be on file at the Lake County Probate Court.

To obtain a certified copy of your marriage license/certificate you may mail your request form to the Lake County Probate Court. **See request form on the next page.**

Your request must include the names of both parties, maiden name if applicable, date of marriage, the number of copies you are requesting, and a phone number you can be reached at. You will need to provide a valid phone number for in the instance that your request is unable to be processed.

You will need to send a self-addressed envelope with proper postage, and include \$2.00 in cash or a money order, for each copy to Lake County Probate Court.

**IF YOU HAVE ANY FURTHER QUESTIONS PLEASE CONTACT THE  
LAKE COUNTY MARRIAGE DEPARTMENT AT  
#440-350-2326 or  
[marriagedepartment@lakecountyohio.gov](mailto:marriagedepartment@lakecountyohio.gov)**

Lake County Court of Common Pleas  
Division of Probate  
*Judge Mark J. Bartolotta*



Lake County Courthouse, West Annex  
25 North Park Place  
Painesville, Ohio 44077  
**Mailing Address:** P.O Box 490  
Painesville, Ohio 44077  
[www.lakecountyohio.gov/probatelco](http://www.lakecountyohio.gov/probatelco)

# PROBATE COURT OF LAKE COUNTY OHIO

## REQUEST FOR A CERTIFIED COPY OF A MARRIAGE RECORD

*Please be advised, this form only applies if your Marriage Record is on file with the Lake County Probate Court.*

DATE: \_\_\_\_\_

NO. OF COPIES \_\_\_\_\_

AMOUNT: \_\_\_\_\_ (\$2.00 EACH)

### MARRIAGE INFORMATION:

Date of Marriage: \_\_\_\_\_ City of Marriage: \_\_\_\_\_ State: \_\_\_\_\_

Marriage License No. (if known): \_\_\_\_\_ County of License: \_\_\_\_\_

Spouse 1 Full/Maiden Name: \_\_\_\_\_

Spouse 2 Full/Maiden Name: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

Person requesting a copy: \_\_\_\_\_

Relationship to the Person on Record: \_\_\_\_\_

### MAILING INFORMATION:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone\*: \_\_\_\_\_

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***If mailing in request:*** Please send this form with a self-addressed stamped envelope and cash or money order for amount due. Once received, it may take up to 7 business days to return.



#### **Mail To:**

Attn: Marriage Records  
P O Box 490  
Painesville, Ohio 44077