

# 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 each applicant resides. If neither applicant is a Maine resident, return the application to the municipality where the marriage will take place. 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 DATE: (Mo., Day, Yr.): ____/____/____ NAME OF FORMER SPOUSE: _____	28. First, Second, etc. (Specify)	<input type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE <input type="checkbox"/> ANNULMENT DATE: (Mo., Day, Yr.): ____/____/____ NAME OF FORMER SPOUSE: _____
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. IF BOTH PARTIES RESIDE OUT OF THE STATE OF MAINE, THE OTHER SIDE OF THIS FORM **MUST** BE COMPLETED AND NOTARIZED.

» \_\_\_\_\_  
 Signature of Groom  
 Telephone Number (optional): \_\_\_\_\_  
 Personally appeared before me the above named and made oath to the truth and foregoing statement:

» \_\_\_\_\_  
 Signature of Bride  
 Telephone Number (optional): \_\_\_\_\_

» \_\_\_\_\_  
 (Signature of Notary Public/Municipal Clerk)

» \_\_\_\_\_  
 (Signature of Notary Public/Municipal Clerk)

My term expires: \_\_\_\_\_  
 State of \_\_\_\_\_  
 County of \_\_\_\_\_  
 Town/City of \_\_\_\_\_

My term expires: \_\_\_\_\_  
 State of \_\_\_\_\_  
 County of \_\_\_\_\_  
 Town/City of \_\_\_\_\_

Marriage is planned to take place on _____ at _____ <small style="margin-left: 150px;">Date (Mo., Day, Yr.)</small>	
Officiant (if known) will be: _____	Title: _____ <small style="margin-left: 100px;">(Religious/Civil)</small> Telephone # (optional)
Officiant's Address _____	_____
<small>Street</small>	<small>City</small> <small>State</small> <small>Zip Code</small>

**DO NOT WRITE BELOW THIS LINE - MUNICIPAL CLERK USE ONLY**

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