

# *Town of Richmond*

737-4305 ext. 202

## **Marriage Intentions Application Instructions**

- The marriage intentions application is a legal document. You are responsible and liable for providing the information and documentation required.
  
- Signatures must be witnessed by the Town Clerk or notarized.  
(Notary Public services available at the Town Office)
  
- If either party is divorced, widowed or had their marriage legally annulled the Town Clerk must view the certified document verifying how the previous marriage ended. A certified copy means that the documents are affixed with a **raised original seal** and/or contain original signatures.
  
- Both parties should appear in person with proper identification with proof of current address:
  - Driver's license/State ID with current address; or
  - Bank statement or checkbook; or
  - 3 pieces of current mail (preferably bills)
  
- The filing fee is \$30.00.
  
- Out of State residents must file intentions with the municipality where they intend to be married. The license, when issued, is valid in that municipality only. The filing fee is \$30.00.
  
- The marriage license expires 90 days from the date of filing your intentions.

## Confidential Record of Social Security Numbers Required for State of Maine Marriage Licenses

Pursuant to Maine State law, Title 19A, section 651 (2), when an application (intentions form) for a marriage license is submitted in the State of Maine, the applicants shall provide the Clerk with the Social Security numbers of both the bride and the groom.

Groom's Full Name: \_\_\_\_\_

Groom's Social Security Number: \_\_\_\_\_

Bride's Full Name: \_\_\_\_\_

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Bride's Social Security Number: \_\_\_\_\_

I hereby certify that the above information is true and correct to the best of my knowledge. **Town Clerk must witness signatures.**

Groom's Signature: \_\_\_\_\_

Bride's Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

I hereby certify that I will record the above Social Security numbers as required by state law and this record will remain confidential and not open for public inspection.

Town Clerk or Deputy Clerk: \_\_\_\_\_

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

Date Signed: \_\_\_\_\_

# 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					
<b>GROOM</b>			<b>BRIDE</b>		
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
DATE: (Mo., Day, Yr.): _____/_____/_____			DATE: (Mo., Day, Yr.): _____/_____/_____		
NAME OF FORMER SPOUSE: _____			NAME OF FORMER SPOUSE: _____		
Is groom currently registered with the state of Maine as a domestic partner? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, year registered: _____			Is bride currently registered with the state of Maine as a domestic partner? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, year registered: _____		
LOCATION/NAME OF COURT: _____			LOCATION/NAME OF COURT: _____		

First cousins are required by law to obtain a certificate of genetic counseling by a physician.

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: \_\_\_\_\_  
 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: 150px;">(Religious/Civil)</small> <small style="margin-left: 100px;">Telephone # (optional)</small>
Officiants Address _____ <small style="margin-left: 20px;">Street</small> <small style="margin-left: 150px;">City</small> <small style="margin-left: 100px;">State</small> <small style="margin-left: 50px;">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.): \_\_\_\_\_