

STATE OF NEW YORK

APPLICATION FOR MARRIAGE LICENSE – TOWN OF NEWBURGH, NY 12550

REQUIRED: VALID DRIVERS LICENSE OR PASSPORT, ORIGINAL BIRTH CERTIFICATES WITH RAISED SEALS & IF PREVIOUSLY MARRIED, DIVORCE PAPERS OR DEATH CERTIFICATE(S)

GROOM/PARTNER #1

BRIDE/PARTNER #2

PHONE NUMBER: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

1a. FULL NAME: \_\_\_\_\_

11a. FULL NAME: \_\_\_\_\_

1b. BIRTH NAME, IF DIFFERENT: \_\_\_\_\_

11b. BIRTH NAME, IF DIFFERENT: \_\_\_\_\_

1c. SURNAME AFTER MARRIAGE: \_\_\_\_\_

11c. SURNAME AFTER MARRIAGE: \_\_\_\_\_

1d. SOCIAL SECURITY NUMBER: \_\_\_\_\_

11d. SOCIAL SECURITY NUMBER: \_\_\_\_\_

2a. RESIDENCE a. \_\_\_\_\_ b. \_\_\_\_\_

12a. RESIDENCE a. \_\_\_\_\_ b. \_\_\_\_\_

(STATE) (COUNTY)

(STATE) (COUNTY)

2c. CHECK ONE AND  CITY  TOWN  VILLAGE SPECIFY : \_\_\_\_\_

12c. CHECK ONE AND  CITY  TOWN  VILLAGE SPECIFY : \_\_\_\_\_

2d. STREET ADDRESS W/ZIP: \_\_\_\_\_

12d. STREET ADDRESS W/ZIP: \_\_\_\_\_

2e. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE:  YES  NO

12e. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE:  YES  NO

3. a. AGE: \_\_\_\_\_ 13b. DATE OF BIRTH: \_\_\_\_\_

13. a. AGE: \_\_\_\_\_ 13B. DATE OF BIRTH: \_\_\_\_\_

3c. SEX (OPTIONAL): \_\_\_\_\_

13C. SEX (OPTIONAL): \_\_\_\_\_

4. EMPLOYMENT/OCCUPATION: \_\_\_\_\_

14. EMPLOYMENT/OCCUPATION: \_\_\_\_\_

4a. TYPE OF BUSINESS/INDUSTRY: \_\_\_\_\_

14a. TYPE OF BUSINESS/INDUSTRY: \_\_\_\_\_

5. PLACE OF BIRTH: \_\_\_\_\_

15. PLACE OF BIRTH: \_\_\_\_\_

6. FATHER'S NAME OR PARENT (OR MAIDEN NAME IF APPLICABLE): \_\_\_\_\_

16. FATHER'S NAME OR PARENT (OR MAIDEN NAME IF APPLICABLE): \_\_\_\_\_

6a. COUNTRY OF BIRTH: \_\_\_\_\_

16a. COUNTRY OF BIRTH: \_\_\_\_\_

7. MOTHER'S NAME OR PARENT (OR MAIDEN NAME IF APPLICABLE): \_\_\_\_\_

17. MOTHER'S NAME OR PARENT (OR MAIDEN NAME IF APPLICABLE): \_\_\_\_\_

7a. COUNTRY OF BIRTH: \_\_\_\_\_

17a. COUNTRY OF BIRTH: \_\_\_\_\_

8. NUMBER OF THIS MARRIAGE: \_\_\_\_\_

18. NUMBER OF THIS MARRIAGE: \_\_\_\_\_

9. PREVIOUS MARRIAGES (IF APPLICABLE)

19. PREVIOUS MARRIAGES (IF APPLICABLE)

DIVORCE \_\_\_\_\_

DIVORCE \_\_\_\_\_

CIVIL ANNULMENT \_\_\_\_\_

CIVIL ANNULMENT \_\_\_\_\_

DEATH \_\_\_\_\_

DEATH \_\_\_\_\_

10. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE FOLLOWING INFORMATION:

20. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE FOLLOWING INFORMATION:

DATE OF DECREE PLACE ISSUED

DATE OF DECREE PLACE ISSUED

1<sup>ST</sup>: \_\_\_\_\_

1<sup>ST</sup>: \_\_\_\_\_

2<sup>ND</sup>: \_\_\_\_\_

2<sup>ND</sup>: \_\_\_\_\_

3<sup>RD</sup>: \_\_\_\_\_

3<sup>RD</sup>: \_\_\_\_\_

4<sup>TH</sup>: \_\_\_\_\_

4<sup>TH</sup>: \_\_\_\_\_

ADDRESS OF RESIDENCE AFTER MARRIAGE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



OFFICIAL OFFICE USE ONLY

Return to: [town-clerk@townofnewburgh.org](mailto:town-clerk@townofnewburgh.org)

Or fax: 845-564-8589