

STATE OF NEW YORK

DEPARTMENT OF HEALTH AFFIDAVIT, LICENSE and CERTIFICATE OF MARRIAGE

YOUR TELEPHONE NUMBER:

() _____

BRIDE/GROOM/SPOUSE				BRIDE/GROOM/SPOUSE			
1. A. FULL NAME _____ FIRST MIDDLE CURRENT SURNAME				11. A. FULL NAME _____ FIRST MIDDLE CURRENT SURNAME			
B. BIRTH NAME, IF DIFFERENT _____				B. BIRTH NAME, IF DIFFERENT _____			
C. SURNAME AFTER MARRIAGE _____ (OPTIONAL - SEE REVERSE)				C. SURNAME AFTER MARRIAGE _____ (OPTIONAL - SEE REVERSE)			
D. SOCIAL SECURITY NUMBER _____				D. SOCIAL SECURITY NUMBER _____			
2. RESIDENCE A. _____ B. _____ (STATE) (COUNTY)				12. RESIDENCE A. _____ B. _____ (STATE) (COUNTY)			
C. CHECK ONE AND SPECIFY CITY <input type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE <input type="checkbox"/>				C. CHECK ONE AND SPECIFY CITY <input type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE <input type="checkbox"/>			
D. STREET ADDRESS _____ ZIP _____				D. STREET ADDRESS _____ ZIP _____			
E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? YES <input type="checkbox"/> NO <input type="checkbox"/>				E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? YES <input type="checkbox"/> NO <input type="checkbox"/>			
3. A. AGE _____ B. DATE OF BIRTH _____ C. SEX (OPTIONAL) _____ MM/DD/YYYY				13. A. AGE _____ B. DATE OF BIRTH _____ C. SEX (OPTIONAL) _____ MM/DD/YYYY			
4. EMPLOYMENT				14. EMPLOYMENT			
A. USUAL OCCUPATION _____				A. USUAL OCCUPATION _____			
B. TYPE OF INDUSTRY OR BUSINESS _____				B. TYPE OF INDUSTRY OR BUSINESS _____			
5. PLACE OF BIRTH _____ (CITY, STATE / COUNTRY, IF NOT USA)				15. PLACE OF BIRTH _____ (CITY, STATE / COUNTRY, IF NOT USA)			
6. FATHER OR PARENT				16. FATHER OR PARENT			
A. NAME (OR MAIDEN NAME, IF APPLICABLE) _____				A. NAME (OR MAIDEN NAME, IF APPLICABLE) _____			
B. COUNTRY OF BIRTH _____				B. COUNTRY OF BIRTH _____			
7. MOTHER OR PARENT				17. MOTHER OR PARENT			
A. NAME (OR MAIDEN NAME, IF APPLICABLE) _____				A. NAME (OR MAIDEN NAME, IF APPLICABLE) _____			
B. COUNTRY OF BIRTH _____				B. COUNTRY OF BIRTH _____			
8. NUMBER OF THIS MARRIAGE _____				18. NUMBER OF THIS MARRIAGE _____			
9. PREVIOUS MARRIAGES				19. PREVIOUS MARRIAGES			
A. NUMBER OF PREVIOUS MARRIAGES WHICH ENDED BY DIVORCE: _____ CIVIL ANNULMENT: _____ DEATH: _____				A. NUMBER OF PREVIOUS MARRIAGES WHICH ENDED BY DIVORCE: _____ CIVIL ANNULMENT: _____ DEATH: _____			
B. HOW DID LAST MARRIAGE END? DIVORCE <input type="checkbox"/> (3) ANNULMENT <input type="checkbox"/> (3) DEATH <input type="checkbox"/> (2)				B. HOW DID LAST MARRIAGE END? DIVORCE <input type="checkbox"/> (3) ANNULMENT <input type="checkbox"/> (3) DEATH <input type="checkbox"/> (2)			
C. DATE LAST MARRIAGE ENDED? _____ MM/DD/YYYY				C. DATE LAST MARRIAGE ENDED? _____ MM/DD/YYYY			
D. ARE ANY FORMER SPOUSE(S) ALIVE? YES <input type="checkbox"/> NO <input type="checkbox"/>				D. ARE ANY FORMER SPOUSE(S) ALIVE? YES <input type="checkbox"/> NO <input type="checkbox"/>			
10. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION				20. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION			
DATE OF DECREE PLACE ISSUED AGAINST WHOM				DATE OF DECREE PLACE ISSUED AGAINST WHOM			
(MONTH, DAY, YEAR) (CITY/COUNTY, STATE/COUNTRY, IF NOT USA) SELF SPOUSE				(MONTH, DAY, YEAR) (CITY/COUNTY, STATE/COUNTRY, IF NOT USA) SELF SPOUSE			
1ST _____ <input type="checkbox"/> <input type="checkbox"/>				1ST _____ <input type="checkbox"/> <input type="checkbox"/>			
2ND _____ <input type="checkbox"/> <input type="checkbox"/>				2ND _____ <input type="checkbox"/> <input type="checkbox"/>			
3RD _____ <input type="checkbox"/> <input type="checkbox"/>				3RD _____ <input type="checkbox"/> <input type="checkbox"/>			

- Please print your information in the form above.
- It is important to call ahead and schedule an appointment. This is to assure that a registrar is here to prepare your license. 772-0357 (Ext. 26)
- Receipt of this form prior to your appointment will expedite the licensing process.

Town of Binghamton, Town Clerk's Office, 279 Park Avenue, Binghamton, NY. 13903