

APPLICANT INFORMATION

PLEASE PRINT OR TYPE

Name (First) (Middle) (Last)
of Applicant

Mailing Address

Email Address

Date of Birth

Telephone #

Proof of Identity Presented Drivers License Passport Work ID Student ID Other _____

**COUPLE TO BE MARRIED INFORMATION
(as it appears on the marriage license)**

PLEASE PRINT OR TYPE

Name (First) (Middle) (Last) Name (First) (Middle) (Last)
of Spouse 1 of Spouse 2

Spouse 1
Date of Birth

Spouse 2
Date of Birth

Address
of Spouse 1

Address
of Spouse 2

Date of Marriage Ceremony

Register Number
of Marriage License Issued

Signature of Applicant – **Signature must be notarized or witnessed by the City Clerk**

I duly swear/affirm that the information provided above is true and accurate

AFFIX NOTARY
STAMP HERE

Signature of Applicant Date

Please Note: This license is valid only for the parties to be married as described above and shall expire after the marriage ceremony or the expiration of the marriage license, whichever occurs first.

OFFICE USE ONLY

Signature of City Clerk/Deputy City Clerk Date

License granted this ____ day of _____, 20__

BE SURE YOUR APPLICATION INCLUDES THE FOLLOWING:

- A completed application form, including a notarized signature.
Incomplete applications will be rejected!
- A clear copy of your valid driver's license or non-driver's ID.
Expired licenses are not accepted.
- A check or money order for \$25.00 made payable to
"CITY OF LONG BEACH"
- A self addressed, stamped envelope.

PLEASE NOTE:

- If paying by check, applications will be held seven (7) business days.
- This license is valid only for the parties to be married as described above and shall expire after the marriage ceremony or the expiration of the marriage license, whichever occurs first.

SEND YOUR COMPLETED APPLICATION TO:

**CITY OF LONG BEACH
ATTN: CITY CLERK – MARRIAGE RECORDS
1 WEST CHESTER STREET
LONG BEACH, NY 11561**

QUESTIONS?

By phone: (516) 431-1002

On the web: <http://www.longbeachny.org/cityclerk>