

Please use this checklist to verify you meet all the requirements necessary to obtain a marriage license in Allen County:

1)

___ The marriage ceremony will be performed within 60 days of the issuance of the license.

2)

___ At least one applicant must be an Allen County resident and the marriage ceremony will be performed within the State of Ohio.

OR

___ Both applicants are out of state residents and the marriage ceremony will be performed within Allen County, Ohio.

BRING THE FOLLOWING WITH YOU TO THE COURT:

(Monday through Friday between the hours of 8:30 am to 4 pm)

The Court is closed for lunch daily from 12:00 pm to 1 pm

___ Printed copy of the fully completed and unsigned Marriage Application.
(Marriage Application must be signed in the presence of Court personnel.)

___ Valid government issued photo ID (driver's license, state ID, passport or Visa)

___ Social Security number (card not required). Social Security numbers are held in confidence and are not a part of the public record.

___ File stamped copy of Divorce Decree, if applicable

___ \$50 License Fee (cash or credit card)

**Persons 17 years of age may be licensed to marry only with the prior consent of the Juvenile Court (Ohio Revised Code Section 3101.02(A)). Persons under 17 years of age may not be licensed to marry by the State of Ohio.

If all requirements are met, please continue with the application. Thank you.

MARRIAGE RECORD

No.	
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In the Matter of

Court of Common Pleas, Probate Division

_____ and _____
(first, middle and last name)

Allen County, Ohio

_____ (first, middle and last name)

MARRIAGE LICENSE APPLICATION

To the Honorable Judge of the Court of Common Pleas, Probate Division of said County:

The undersigned respectfully make application for a Marriage License for said parties and upon oath state:

APPLICANT 1

APPLICANT 2

1. Full Name (first, middle and last)	9. Full Name (first, middle and last)
2. Age last birthday and date of birth	10. Age last birthday and date of birth
3. Residence (street address, city, county, state and zip code)	11. Residence (street address, city, county, state and zip code)
4. Birthplace (city and state or country)	12. Birthplace (city and state or country)
5. Occupation	13. Occupation
6. Name of Parent 1 (full birth name)	14. Name of Parent 1 (full birth name)
7. Name of Parent 2 (full birth name)	15. Name of Parent 2 (full birth name)
8. Number of Times Previously Married	16. Number of Times Previously Married

PRIOR MARRIAGES

Applicant 1:

Name of former spouse _____ "Marriage terminated by" Divorce or dissolution "Death of spouse"
If by divorce or dissolution: Date of decree _____ Case No. _____ State _____ County _____
Name and age of minor children of the marriage: _____

Applicant 2:

Name of former spouse _____ "Marriage terminated by" Divorce or dissolution "Death of spouse"
If by divorce or dissolution: Date of decree _____ Case No. _____ State _____ County _____
Name and age of minor children of the marriage: _____

That neither of the parties is under the influence of an intoxicating liquor or controlled substance or infected with syphilis in a form that is communicable or likely to become communicable.

"That the parties are not nearer of kin than second cousins, and there is no legal impediment to the marriage.

Applicant 1 (signature)

Applicant 2 (signature)

Sworn to before me and signed in my presence this _____ day of _____, 20_____.

TODD E. KOHLRIESER, Judge

By _____
Deputy Clerk

ENTRY

Marriage License issued this day to above Applicants.

Date: _____

TODD E. KOHLRIESER, Judge

By _____
Deputy Clerk