

**Marriage Licenses are by appointment only.**

To apply for a Marriage License, please complete form and bring along with all other documents and \$50.00 (**cash only**) to the 2<sup>nd</sup> floor, Ottawa County Probate Court at your scheduled appointment time.

**Applicant 1:**

Full Name: \_\_\_\_\_  
(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

County: \_\_\_\_\_

Phone Number: \_\_\_\_\_

City and State of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
(First) (M.) (Last)

Mother's **Maiden** Name: \_\_\_\_\_  
(First) (M..) (Last)

Your Occupation: \_\_\_\_\_

Previously Widowed:  **Yes**  **No** (If "yes", please bring documentation)

Previously Married:  **Yes**  **No** (If "yes", number of previous marriages) \_\_\_\_\_

**RECORD OF MOST RECENT DIVORCE (IF APPLICABLE)**

Former Spouse's Name: \_\_\_\_\_  
(at time of marriage)

Divorce Date: \_\_\_\_\_ Case Number: \_\_\_\_\_

Divorce State and County: \_\_\_\_\_

Names & Ages of Minor Children by this Marriage:

**\*\*IF MORE THAN 1 FILL OUT "ADDENDEM" FORM FOR EACH DIVORCE, PLEASE BRING PROOF OF MOST RECENT DIVORCE DECREE WITH YOU\*\***

**Applicant 2:**

Full Name: \_\_\_\_\_  
(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

County: \_\_\_\_\_

Phone Number: \_\_\_\_\_

City and State of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
(First) (M.) (Last)

Mother's **Maiden** Name: \_\_\_\_\_  
(First) (M.) (Last)

Your Occupation: \_\_\_\_\_

Previously Widowed:  **Yes**  **No** (If "yes", please bring documentation)

Previously Married:  **Yes**  **No** (If "yes", number of previous marriages) \_\_\_\_\_

**RECORD OF MOST RECENT DIVORCE (IF APPLICABLE)**

Former Spouse's Name: \_\_\_\_\_  
(at time of marriage)

Divorce Date: \_\_\_\_\_ Case Number: \_\_\_\_\_

Divorce State and County: \_\_\_\_\_

Names & Ages of Minor Children by this Marriage:

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

**\*\*IF MORE THAN 1 FILL OUT "ADDENDEM" FORM FOR EACH DIVORCE, PLEASE BRING PROOF OF MOST RECENT DIVORCE DECREE WITH YOU\*\***

**OFFICIANT INFORMATION:**

**(If you are unsure, leave this section blank, it will be filled in at a later date.)**

Officiant's First and Last Name: \_\_\_\_\_

Officiant's Title: \_\_\_\_\_

Officiant's Address: \_\_\_\_\_

Officiant's Phone Number: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_

Publish in Newspapers:  Yes  No