

**MICHELLE DOWLING, TOWN CLERK
229 CHURCH STREET, NAUGATUCK, CT
203.720.7055**

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| DATE OF APPLICATION: |
| DATE OF MARRIAGE: |
| EXPIRATION DATE: |

**STATE OF CONNECTICUT
Department of Public Health
MARRIAGE LICENSE WORKSHEET**

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|--------------------------------------|
| PAID: |
| PHONE: |
| BRIDE HOME GROOM WORK CELL |

BRIDE/GROOM/SPOUSE

BRIDE/GROOM/SPOUSE

| | | | | | |
|--|---|--|--|---|--|
| NAME (First) (Middle) (Last) | | | NAME (First) (Middle) (Last) | | |
| SEX | DATE OF BIRTH (Month, Day, Year) | AGE | SEX | DATE OF BIRTH (Month, Day, Year) | AGE |
| BIRTHPLACE | EDUCATION (Number of Years Completed) | | BIRTHPLACE | EDUCATION (Number of Years Completed) | |
| | GRADES 1-8 | GRADES 9-12 | | COLLEGE (1-5+) | GRADES 1-8 |
| RESIDENCE (Number & Street) | | | RESIDENCE (Number & Street) | | |
| CITY OR TOWN | COUNTY | STATE | CITY OR TOWN | COUNTY | STATE |
| RACE | SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR YES NO | | RACE | SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR YES NO | |
| FATHER=S NAME | | | FATHER=S NAME | | |
| MOTHER=S MAIDEN NAME | | | MOTHER=S MAIDEN NAME | | |
| FATHER'S BIRTHPLACE (State or Foreign Country) | MOTHER'S BIRTHPLACE (State or Foreign Country) | | FATHER'S BIRTHPLACE (State or Foreign Country) | MOTHER'S BIRTHPLACE (State or Foreign Country) | |
| NO. OF THIS MARRIAGE | NO. OF CIVIL UNIONS | 21a. IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. MARRIAGE 2. CIVIL UNION | NO. OF THIS MARRIAGE | NO. OF CIVIL UNIONS | 42a. IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. MARRIAGE 2. CIVIL UNION |
| LAST RELATIONSHIP ENDED BY: 1. DEATH 2. DISSOLUTION 3. ANNULMENT 4. PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER | | | LAST RELATIONSHIP ENDED BY: 1. DEATH 2. DISSOLUTION 3. ANNULMENT 4. PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER | | |
| SOCIAL SECURITY NUMBER | | | SOCIAL SECURITY NUMBER | | |

OFFICIATOR INFORMATION

| | | |
|---|---------|--------|
| OFFICIATOR=S NAME: | (First) | (Last) |
| OFFICIATOR=S ADDRESS: | | |
| OFFICIATOR=S PHONE NUMBER: | | |
| TOWN WHERE MARRIAGE CEREMONY WILL BE PERFORMED: | | |