State of Maine Department of Health and Human Services Intention of Marriage Application (VS2-A)

Please type or clearly print with **black ink**

Bride sental Consent form fiddle, Last, Suffix) rriage (First, Middle Birthplace Country or to First Marriage	, Last, Suffix)				d Date of Marriage:				
<i>liddle, Last, Suffix)</i> rriage <i>(First, Middle</i> Birthplace Country	, Last, Suffix)								
rriage <i>(First, Middle</i> Birthplace Country		Birth (mm/dd/yyy							
Birthplace Country		Birth <i>(mm/dd/yy</i> y							
	5. Date of E	Birth (mm/dd/yyy							
or to First Marriage			<i>y</i>) 6. A	ge 7.	7. Sex: □ Male				
or to First Marriage					Female				
or to First Marriage					□ Nonbinary X				
	8. Father/Parent Name Prior to First Marriage (<i>First, Middle, Last, Suffix</i>) 9. Birth								
11. Mother/Parent Name Prior to First Marriage (First, Middle, Last, Suffix) 12. Birthpla					13. Country				
14. Party A Residence Address (Street number, name and/or designator)15. (
17. State		18. Country			19. Zip Code				
20. Party A Mailing Address (Street or PO) (Apt/Unit)				21. City/Town					
unty 23. State		24 Country			25. Zip Code				
25. State		24. Country	r. Country		25. Zip Code				
26. Party A Telephone Number (10 digits)27. Party A E-ma				dress (If ap	plicable)				
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30. Number of this Marriage: (First, Second, etc.) 31. If Previously Marrie					arriage Ended by:				
				□ Death □ Divorce □ Annulment					
led (mm/dd/yyyy)	33. Name of]	Former Spouse	(First, Mid	dle, Last, S	Suffix)				
Court <u>or</u> City/State a	and Country o	f Death							
th the State of Main	e as a Domest	ic Partner? ¬Y	es ⊓ No)					
				·					
ed by law to obtain a			ing by a ph	nysician. A	Are you first cousins?				
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			JIS to man	ry applica	ation is valid only for				
Signature of Party A					Date Signed				
• • • •				-	-				
			ntions or n						
Signature of Notary Public or Filing Official ►		Printed Name			Date Signed				
Town	Coun	ty		St	ate				
	ress (Street number, 17. State 17. State (23. State nber (10 digits) Name After this Ma re: (First, Second, et ded (mm/dd/yyyy) Court or City/State a th the State of Main ed by law to obtain a ereby certify that the ler the laws of Main State of Maine to ob s personally appeared a notary seal, embos or Filing Official Town	ress (Street number, name and/or 17. State ss (Street or PO) (Apt/Unit) 23. State nber (10 digits) Name After this Marriage (First, I ge: (First, Second, etc.) ded (mm/dd/yyyy) 33. Name of I Court or City/State and Country of th the State of Maine as a Domest ed by law to obtain a certificate of Pres filter reby certify that the information a der the laws of Maine. I understa State of Maine to obtain a marriag s personally appeared before me ar a notary seal, embosser or stamp of or Filing Official Printer	ress (Street number, name and/or designator) 17. State 18. Country ss (Street or PO) (Apt/Unit) 23. State 24. Country nber (10 digits) 27. Party A I Name After this Marriage (First, Middle, Last, Sugge: (First, Second, etc.) 31. If Previo ge: (First, Second, etc.) 31. If Previo ded (mm/dd/yyyy) 33. Name of Former Spouse of Court or City/State and Country of Death th the State of Maine as a Domestic Partner? Yes weed by law to obtain a certificate of genetic counsel 9 Yes weed by law to obtain a certificate of genetic counsel 9 Yes weed by law to obtain a certificate of genetic counsel 9 Yes state of Maine. 1 understand this "intention State of Maine to obtain a marriage license. state of Maine to obtain a marriage license. 9 Printed Name Town County	ress (Street number, name and/or designator) 15. City/ 17. State 18. Country ss (Street or PO) (Apt/Unit) 21. City/ 23. State 24. Country nber (10 digits) 27. Party A E-mail Add Name After this Marriage (First, Middle, Last, Suffix) ge: (First, Second, etc.) 31. If Previously Marri Death ded (mm/dd/yyyy) 33. Name of Former Spouse (First, Middle, Country) State of Maine as a Domestic Partner? Yes Yes No ereby certify that the information above is correct to the best der the laws of Maine. I understand this "intentions to mar State of Maine to obtain a marriage license. spersonally appeared before me and made oath to the truth a a notary seal, embosser or stamp on marriage intentions or n or Filing Official Printed Name Town	ress (Street number, name and/or designator) 15. City/Town 17. State 18. Country ss (Street or PO) (Apt/Unit) 21. City/Town 23. State 24. Country nber (10 digits) 27. Party A E-mail Address (If ap Name After this Marriage (First, Middle, Last, Suffix) 29. Socia ge: (First, Second, etc.) 31. If Previously Married, Last M Death Divorce ded (mm/dd/yyyy) 33. Name of Former Spouse (First, Middle, Last, S Court or City/State and Country of Death 1 th the State of Maine as a Domestic Partner? Yes P Yes No ereby certify that the information above is correct to the best of my know ereby certify that the information above is correct to the best of my know ereby certify that the information above is correct to the best of my know ereby certify that the information above is correct to the best of my know fer the laws of Maine. I understand this "intentions to marry" applica State of Maine to obtain a marriage license. D ge personally appeared before me and made oath to the truth and foregoin a notary seal, embosser or stamp on marriage intentions or marriage lice or Filing Official				

*Federal law requires the collection of social security numbers from applicants for a marriage license. (42 USC §666). *The SSN is confidential information and may not be disclosed (1 M.R.S. §402 (3)(N).* This document (the "State of Maine Intentions of Marriage" application) becomes a public record 50 years *after* the date on this intention to marry application (19-A M.R.S. §651). Because the SSN is confidential information that may *not* be disclosed, the SSN must be deleted (redacted) from this document before it is open for public inspection after 50 years. The social security number (SSN) is retained by the State Agency and the municipal clerks responsible for the administration of the vital statistics system.

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Please type or clearly print with **black ink**

	Please ty	pe or clearly p	rint with <u>black</u>	ink				
Party B (check one:)	· · · · · · · · · · · · · · · · · · ·		Proposed Date of Marriage:					
(Please complete the P		if Party B is les	ss than the age	of 18.)				
37. Current Name (First,	Middle, Last, Suffix)							
38. Name Prior to First M	Iarriage (First, Middle	r, Last, Suffix)						
39. Birthplace State 40	41. Date of I	ate of Birth (<i>mm/dd/yyyy</i>) 42. Age			7. Sex: □ Male			
_					-	Female		
						□ Nonbinary X		
44. Father/Parent Name F	Last, Suffix)	45. Birthplace State 46. Country		46. Country				
47. Mother/Parent Name Prior to First Marriage (First, Middle, Last, Suffix) 48. B					place State	49. Country		
50. Party B Residence Address (Street number, name and/or designator)					51. City/Town			
52. County	53. State		54. Country			55. Zip Code		
56. Party B Mailing Address (Street or PO) (Apt/Unit) 57. City/To								
58. County	59. State		60. Country			61. Zip Code		
62. Party B Telephone Number (10 digits) 63. Party B E-mail A					dress (If app	olicable)		
					r			
64. Party B Proposed New	w Name After this Ma	rriage (First, N	Iiddle, Last, Su	ffix)	65. Social	Security Number*		
66. Number of this Marriage: (First, Second, etc.)67. If Previously					ied, Last Ma	arriage Ended by:		
6 (1 1 1 1 1 1 1 1 1 1			\Box Death \Box Divorce \Box Annulment					
68. Date Last Marriage E	Inded (mm/dd/yyyy)	69. Name of F	ormer Spouse	(First, Mia	ldle, Last, S	uffix)		
70. Name and Location o	f Court <u>or</u> City/State a	and Country of	Death					
71 I.D. () ()								
71. Is Party B registered	with the State of Main	ie as a Domesti	c Partner? \Box	res □ N	0			
72. First cousins are requ	uired by law to obtain a	a certificate of	genetic counsel	ling hy a n	hysician A	re you first cousins?		
72. 1 list cousilis are requ	ined by luw to obtain t		∃ No	ing of a p	nysioian. 7	lie you liist cousilis.		
Signed Certification ~ I	hereby certify that the			to the best	of my knov	vledge and belief and		
that I am free to marry u					-	2		
marriages performed in th	ne State of Maine to ob	otain a marriag	e license.					
Signature of Party B						Date Signed		
	11	11 0	1 1	.1 1	1.0			
The above-named party h					-	-		
Notaries, please do not us				ntions or n				
Signature of Notary Publi	ic of Filing Official	Printe	d Name			ate Signed		
My Term Expires Cit	y/Town	Count	у		St	ate		
Federal law requires the collec	tion of social security nur	nbers from applic	ants for a marriag	e license. (4	2 USC §666).	The SSN is confidentia		

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INSTRUCTIONS FOR PARTIES: Complete every item carefully. Type or neatly print in BLACK ink only. Check the boxes and sign the certification portion in the presence of a notary public, municipal clerk or the State Registrar. Return the completed intentions to the municipality in which at least one party resides or the State Registrar of Vital Statistics. If neither applicant is a Maine resident, parties may file the completed intentions in any municipality or the State Registrar of Vital Statistics.

Previously Married Persons

Persons who have been previously married must present a certified copy of the death certificate of the deceased spouse or the record of divorce or annulment prior to a marriage license being issued. A record of divorce from another state or foreign country is evidence of divorce. If the record is not in English, the record must be translated into English by a disinterested 3rd person at the parties' expense. A marriage contracted when either party fails to submit a certificate or certified copy of the divorce decree or annulment of the last marriage or the death certificate of the last spouse or when either party makes false representations about previous marriages to obtain a marriage license, the marriage will become VOID.

Parties under 18 Years of Age

Parties under *18 years of age* must present the written consent of their parents, guardians, or persons to whom a court has given custody. If both parents are living and have joint custody, the written consent of both parents is required. If a parent is no longer living, a certified copy of the death certificate of the parent and the birth certificate of the parent listing the parent is required.

Parties under *16 years of age* must present the written consent of their parents, guardians, or persons to whom a court has given custody and the written consent from the Judge(s) of Probate in the county in which the minor resides. If both parents are living and have joint custody, the written consent of both parents is required. If a parent is no longer living, a certified copy of the death certificate of the parent and the birth certificate of the parent is required.

Related Parties (First Cousins)

If parties are related as specified by Title 19-A §701 subsection 2, the parties must provide a signed certification certificate from a physician stating that they have received genetic counseling.

Incarcerated Parties

If either of the parties to the marriage are incarcerated in a state correctional facility, a marriage license may be issued (after filing the intentions) without the incarcerated party's original signature on the marriage license. A letter from the facility in which the party is incarcerated must be provided to the issuing official to obtain the marriage license. The letter must be on facility letterhead and state that the party is incarcerated. The signature of the incarcerated party must be obtained on the marriage license at the time the ceremony is performed.

Imminent Death

An authoritative request must be presented at the time marriage intentions are filed from a minister, clergyman, priest, rabbi, or attending physician stating that the death of either party is imminent. The authoritative request must be on facility letterhead, provide the name of patient, state that death is imminent and state the patient is conscious and coherent. The patient must make it known that it is their wish to be married and sign the letter in addition to the signature and printed name of the minister, clergyman, priest, rabbi, or attending physician declaring death is imminent.

Marriage License

Once the marriage intentions have been filed, a marriage license may be issued and is valid for 90 days from the date the intentions were filed. Each party to the intended marriage shall complete the license by appearing in person before the municipal clerk or State Registrar to sign the certification statement on the marriage license. The parties are responsible to provide the marriage license to the Officiant who will solemnize the marriage by performing a marriage ceremony, completing the marriage ceremony section on the marriage license, and obtaining the original signatures of two witnesses who are physically present during the ceremony. The Officiant must return the marriage license to the issuing authority who issued the license within 7 days after the ceremony was performed.