Metropolitan Tribunal—Archdiocese of New York
1011 First Avenue, New York, NY 10022 (Tel) 646-794-3200

Petitioner Information Form

Dear Petitioner,

As you begin preparing the **Petitioner Information Form**, would like to remind you that the purpose of this application is formally to request that the Metropolitan Tribunal initiate an investigation to clarify whether or not you are bound by a previous marriage according to the teaching and law of the Roman Catholic Church. This form and the other required documents (see Checklist) will begin a formal canonical process to resolve the question concerning this marriage. The enclosed Petition, together with the required documents and your sworn testimony, as well as that of your former spouse and witnesses, will provide the basis by which the Tribunal Judges make a decision.

This Information Form is divided into four sections:

- The **first section** asks basic information regarding you (the Petitioner), about your former spouse (the Respondent), and about your courtship and marriage.
- The **second section** is to be completed **only if you cannot locate your former spouse** after trying the sources and avenues available to you**.**
- The **third section** contains a series of questions that will help the Tribunal understand the circumstances related to your marriage. This section also contains information, which will help you in proposing the reason or basis for the Tribunal to examine the validity of your marriage to the Respondent. Lastly, this section contains the Petition itself which is the official document required to open the investigation for a possible declaration of invalidity.
- The **final section** asks for the names and complete addresses of witnesses who can be cited by the Tribunal and asked to come in to give testimony about the marriage in question. **The last page of this document is a checklist of what is required for you to submit to the Tribunal.**

If you would like assistance in completing this form, please speak with a Priest or Deacon at the Parish. Once it is complete, please mail it and the required documents to the Tribunal office. The Tribunal will then notify you of the next steps in the process. In order for the process to run smoothly, it is important that you keep us informed of any change in address for you, your former spouse or your witnesses. Should you have any questions or concerns, please contact the Tribunal.

If, after receiving your Petition and documentation, it is discovered that you have a special case, which might be better addressed, by another type of process, you will be contacted by the Tribunal to explain the options available to you.

The Tribunal cannot guarantee the outcome of the case nor provide a timeframe for its completion; **please do NOT set a date for a wedding** until you have the final decree in hand from the Tribunal.
It is important to note that due to the COVID crisis and personnel shortages, the process can take 2 years or, for difficult cases, possibly longer.

Very Rev. Msgr. Robert J. Hospodar,
J.C.L. Judicial Vicar

**** NEW FEES as of February 1, 2021, see page 22 . ****

PRINT packet: 1-sided only. Do NOT print 2-sided. (The back of each page must be blank.)

Section 1

Petitioner *(you)*

☐ **I AFFIRM BEFORE GOD AND MY CONSCIENCE THAT ALL OF THE INFORMATION I PROVIDE HEREIN IS TRUE AND COMPLETE.**

CONTACT INFORMATION PLEASE PRINT OR TYPE ALL INFORMATION IN BLACK

Title / First Name		Middle Name	
Current Last Name		Family/Maiden Name	
Address			☐ Male ☐ Female
City	County	State	ZIP
Email:		Occupation:	

Please indicate how you may be contacted about your case in addition to regular mail:

Home Telephone	( )
Cellular Telephone	( )
Work Telephone	( ) ext.

You authorize us to leave a message regarding your case at: ☐Email ☐Home phone ☐Cell ☐Work

BIOGRAPHICAL INFORMATION

Date of Birth *(mm/dd/yyyy)*	
Place of Birth: City	
State or Province	Country
Before the marriage in question, were you ever baptized? Yes ☐ No ☐ Not Known ☐	
If yes, in which church or denomination were you baptized?	
What was the date of your baptism? (mm/dd/yyyy) If exact baptism date not yet available , please supply the year:	
Church or parish of baptism	
Street	
City, State or Province, Zip Code	Country
What was your religion or denomination at the time of the wedding?	
What religion or denomination do you **now** observe or practice?	
Current parish or congregation	
City	
State or Province	Country
Is there any Eastern Rite (Catholic or Orthodox) affiliation in your family background (*e.g., Byzantine, Ruthenian, Ukrainian, Maronite, Armenian, Greek, Syrian or other*)? If yes, which?	

Respondent *(the former spouse to the marriage)*

Title	First Name	Middle Name	
Current Last Name		Family Name	
Street Address			☐ Male ☐ Female
City	County	State	ZIP
Telephone: ( )	Country	Are you in contact with the Respondent at this time?	
Email:		Respondent's Occupation:	

⊗ IMPORTANT NOTE: ***You MUST provide the complete current mailing address for the Respondent*. Without this information, the case may not be accepted. If you have made serious efforts to locate the Respondent, but still cannot provide a complete address, see Section 2 and provide all documentation. The Tribunal will attempt also to locate the Respondent; however this may delay the case.**

Respondent's Date of Birth *(*mm/dd/yyyy*)*

Place of Birth: City	State or Province	Country

Before marrying you, was the Respondent ever baptized? Yes ☐ No ☐ Not Known ☐

If yes, in which church or denomination was the Respondent baptized?

What was the date of the Respondent's baptism? *(*mm/dd/yyyy*)*
If exact baptism date not available, please supply the year:

Church or parish of baptism

Street

City, State or Province, Zip Code	Country

What was the Respondent's religion or denomination at the time of the wedding?

What religion or denomination does the Respondent now observe or practice?

Current parish or congregation

City

State or Province	Country

Is there any Eastern Rite (Catholic or Orthodox) affiliation in your family background (*e.g., Byzantine, Ruthenian, Ukrainian, Maronite, Armenian, Greek, Syrian or other*)? If yes, which?

Courtship & Wedding

Briefly, when and how did you and the Respondent meet? (Date:) Circumstances :

How long was your courtship before you decided to marry?

Was there a formal engagement period prior to the wedding?
If yes, Date of Engagement Length of Engagement

Did you and the Respondent live together (cohabit) prior to the wedding? ☐ Yes ☐ No
If yes, how long did you live together before marriage?
If yes, did this have any effect on your decision to marry? If yes, please explain.

Was there a pregnancy or suspicion of a pregnancy prior to this wedding? ☐ Yes ☐ No
If yes, did this have any effect on your decision to marry? Please explain.

Did you and the Respondent enter into a pre-nuptial agreement? ☐ Yes ☐ No
If yes, please attach a copy of the agreement.

In your marriage preparation did you participate in:
Catholic Couple Checkup? ☐ Yes ☐ No
Prepare/Enrich? ☐ Yes ☐ No
Another program? ☐ Yes ☐ No

Exact date of the wedding in question *(*mm/dd/yyyy*)*

The marriage was performed / witnessed by a ☐ Catholic priest or deacon ☐ Other religious official ☐ Civil official ☐ Other (indicate by whom)

Name of priest, minister, or officiant

Church or place of marriage

Address

City	State or Province	ZIP

Country

Where was the civil marriage license obtained? County If appropriate, Country	State or Province

If a civil marriage preceded the church wedding, Date of convalidation or "blessing" *(*mm/dd/yyyy*)*

Name of church or parish

City	State	ZIP

Country

Name of priest or deacon

Why did you have your marriage convalidated at that time?

Was your marriage to the Respondent **your** first marriage? Was the Respondent married to anyone **before** you?

***** Did you ever petition for an annulment for this marriage?_____ If YES, what diocese?_____**

IMPORTANT NOTE: If either you or the Respondent were ever married to anyone before this marriage (whether a civil or a religious wedding), please list information about each prior marriage on the following page.

Other Marriages (before & after) -Yours

If you were married at any time before or after marrying the Respondent, complete the following for each and every marriage:

Marriage #	*Name of Your Spouse*	*Date (mm/dd/yyyy) and Place of Wedding (City, State, Country) and Type of Ceremony: Civil or Religious*	*Was this the 1st marriage for your spouse?*	*If applicable, Date and Place of this Spouse's Death*	*Was this Marriage Declared Null by the Catholic Church?*
1			Yes ☐ If NO, list # of prior marriages:		☐ Yes ☐ No Tribunal location, case # or date:
2			Yes ☐ If NO, list # of prior marriages:		☐ Yes ☐ No Tribunal location, case # or date:
3			Yes ☐ If NO, list # of prior marriages:		☐ Yes ☐ No Tribunal location, case # or date:

If you have Final Decrees from another Court or Tribunal regarding the nullity/dissolution of any other marriages, please attach them to this petition.

Respondent's

If the Respondent was married at any time before or after marrying you, complete the following for each and every marriage:

Marriage #	*Name of their Spouse*	*Date (mm/dd/yyyy) and* *Place of Wedding (City, State, Country)*	*Was this the first marriage for **this** spouse?*	*If applicable, Date and Place of this Spouse's Death*	*Was this Marriage Declared Null by the Catholic Church?*
1			Yes ☐ If NO, list # of prior marriages:		☐ Yes ☐ No Tribunal location, case # or date, if known:
2			Yes ☐ If NO, list # of prior marriages:		☐ Yes ☐ No Tribunal location, case # or date, if known:
3			Yes ☐ If NO, list # of prior marriages:		☐ Yes ☐ No Tribunal location, case # or date, if known:

If you have Final Decrees from another Court or Tribunal regarding the nullity/dissolution of any other marriages, please attach them to this petition.

Separation & Divorce

Approximately how long were you married to the Respondent before the final separation?
Number of separations during the marriage Approximate date of the first separation What brought about the **first** separation (briefly)? Any other separations (briefly)?
What brought about the **final** separation (briefly)? Date of final separation — month year

Date of the civil divorce — month day year Was it a ☐ Divorce or ☐ Civil Annulment	On what grounds was the suit for divorce/annulment brought?
County	State
(or, if applicable, country)	
Name of Court which granted the divorce/annulment	
Who applied for the divorce/annulment: ☐ I did ☐ The Respondent did	

Children

How many children were born during your marriage to the Respondent?
List the year of birth for each child: If there were no children born during the marriage, why not?
How many children did you adopt during your marriage to the Respondent? If any, in what year(s):
How many children are still minors today? Who now has legal custody of the children?
Have you been fulfilling your obligations of visitation/custody of the children? Has the Respondent been fulfilling the obligations of visitation/custody of the children? Are you obligated to pay child and/or spousal support assessed by the civil courts? ☐ Yes ☐ No Are these being met? ☐ Yes ☐ No Is the Respondent obligated to pay child and/or spousal support assessed by the civil courts? ☐ Yes ☐ No Are these being met? ☐ Yes ☐ No

Is there any ongoing or pending litigation in the civil Courts between you and the Respondent? ☐ Yes ☐ No
If yes, please briefly describe:

Is there a current protection-from-abuse order, restraining order, or similar court order in effect between you and the Respondent? ☐ Yes ☐ No. Was there ever such an order? ☐ Yes ☐ No.
If yes, which one?
Please describe the events that led up to it:

Your Current Status

What is your current marital status? ☐ Single ☐ Engaged ☐ Civilly Remarried

If you are remarried or engaged: Full Name of your current or intended spouse:

Title:	First Name:	Middle:	Last Name:

Family name

☐ Male
☐ Female

Street Address

City	State	ZIP	Country

Religion of current or intended spouse:

Date of Birth *(*mm/dd/yyyy*):*

If not Catholic, are either you or your current / intended spouse enrolled in a Catholic RCIA (*Rite of Christian Initiation of Adults*) Program? ☐ Yes ☐ No

If yes, in which parish?

City	State

If Christian, what is the date of your current/intended spouse's Baptism?	Did your current/intended spouse ever change religions?

Is this your only marriage since your marriage to the Respondent? ☐ Yes ☐ No

Was your current or intended spouse ever married before (in either a civil or religious ceremony)?

IMPORTANT NOTE: If your intended spouse has any prior marriages, please be certain to inform the Tribunal of this fact. If neither party is free to marry, no wedding can take place in the Catholic Church.

Section 2

Your Efforts to Locate Your Former Spouse

If you are unable to provide the Tribunal with a complete current address for the Respondent, please complete the questions below. In some cases it may not be possible to accept the case without this information.
YOU MUST PROVIDE DOCUMENTATION FOR ALL SEARCHES AND INVESTIGATIONS ATTEMPTED

Full name of the other spouse to the marriage in question:

First Name	Middle Name	Last Name

Has this person ever been known by another name (for example, a maiden name, an alias, a former name):

If yes, please list all known aliases or family / former names:

First	*Middle*	*Last*	*Date(s) when name was used:*

When was your last contact with the Respondent ☐ in person ☐ by phone ☐ by mail/e-mail

Last known address of the Respondent:

Street

City	State	ZIP

If appropriate, country Telephone Email

When was the last date you knew the Respondent to be at the above address?

Last known telephone number ( ) ☐Home ☐Work ☐Cell

Last known employment: company or employer

Street Address

City	State	ZIP

If you had children, please explain why one of these could not provide you with current contact information for the Respondent:

Addresses of relatives of the Respondent who could be contacted to forward correspondence:

Please list in detail what efforts you have made to locate the Respondent's current address:

• Cities/Towns for which you looked in telephone books (available at libraries) or called Directory Assistance:

Date last checked

• Names and contact information for Attorneys, investigators or other professionals you contacted for help:

• Names and contact information for mutual friends, in-laws, former neighbors, co-workers, etc., you contacted:

• On-line search engines & paid services you used to try to locate the Respondent (give web addresses, print and attach your results)

• Other efforts you made, and when

Section 3

Preparation of Your Petition

The following pages contain several brief questions, which will help the Tribunal to propose grounds for nullity. These questions may also guide you in your understanding of possible grounds. Please answer these questions in the brief space provided below. The Tribunal Judges will determine the actual ground(s) for the case, usually after hearing from the Respondent, and will then inform you.

Please remember that it is not necessary to go into detail in answering the following questions. These are preliminary questions only, and you will have the opportunity later to give in-depth answers to questions relevant to your case before a Judge.

Please remember: if your marriage was later convalidated or "blessed" in the Catholic Church, these questions refer to the time of that convalidation or "blessing," and not to the civil wedding.

Courtship and Decision to Marry

When and how did you and the Respondent meet?

What was happening in your life at the time you met the Respondent? (Give details)

What else was happening in the Respondent's life at the time you met? (Give details)

Who brought up the topic of marriage, and under what circumstances? (Explain the circumstances)

Did anything specific, or anything unusual, occur that prompted your decision to marry? (If YES, please explain)

Was there any pressure to marry on either party? ☐ Yes ☐ No. (If YES, please explain):

How did the engagement occur?

Was the engagement ever cancelled or broken? ☐ Yes ☐ No. If yes, explain the circumstances, any problems that existed during the engagement, and how and why you reconciled:

Was there any force used or fear instilled (internal or external) to marry the Respondent? For the Respondent to marry you? Please explain.

Your Concept of Marriage Itself

At the time of your marriage, did you envision any event or circumstance that would allow you to end the marriage and enter another marriage? ☐ Yes ☐ No. Please explain your answer:

To your knowledge did the Respondent envision any such event or circumstance? ☐ Yes ☐ No. Please explain your answer:

Prior to this marriage, what was your experience of divorce among family and friends?

What was the Respondent's experience?

Do you believe that you and the Respondent shared the same notion of marriage at the time of the wedding? ☐ Yes ☐ No.
Please explain your answer:

Please complete the following, as you would have at the time of your marriage:

Marriage Until Death Do Us Part" means…

Before the wedding, what had you and the Respondent discussed and decided about having children in the marriage?

Did you both share the same ideas and decisions about having children in the marriage? ☐ Yes ☐ No.

Please explain your answer:

Did either you or your former spouse reserve the right to determine when/if to attempt to have children?

Did either of you place conditions on when to attempt to have children (e.g., if the marriage is successful, if a certain financial stability is reached, if a certain career goal is attained)? Please explain.

Did you make a plan regarding the delaying of children through any means or method of birth control or some form of sterilization? If so, what was the plan? Was it carried out? Who used birth control and for how long? Who had the sterilization?

Days prior to the wedding was either of you sexually active with someone else? ☐ Yes ☐ No. (If YES, please explain)

Was infidelity a problem in your marriage to the Respondent? ☐ Yes ☐ No.

If yes, by which spouse, or both?

If either or both were unfaithful, please answer the following:

What was the act?

When did the first act of infidelity occur?

Was infidelity a continuing problem? ☐ Yes ☐ No. If yes, please elaborate.

At the time of the marriage, did you believe that infidelity gives a spouse the right to end the marriage and enter another?

General Considerations

Please explain briefly what problems, issues, or factors you believe caused this marriage to fail, and when each first appeared:

Were you aware of any of the above problems or issues before the wedding? ☐ Yes ☐ No. If yes, please explain why you did not consider the problem/problems serious at that time, or why you decided to marry nevertheless:

What would the Respondent say was ***your*** role in the problems and breakdown of the marriage?

What was the Respondent's role?

When did you stop living together as husband and wife? (What year?)

What led up to the final separation?

Did you discover, after the wedding, something relevant to the marriage that had been hidden or not disclosed before the wedding? If yes, please explain:

Did you marry for a reason other than marriage itself (for example, a pregnancy, a green card, etc.)? Did the Respondent?

Was there any condition set prior to the wedding by either you or the Respondent to be fulfilled by either of you after the wedding? If so, please explain.

Preparing Your Petition

The "Petition" is at the end of this section. It contains basic information required by Canon Law. It contains a section in which you are asked to write a very brief description of why you think the marriage was not valid and binding from the beginning. There are a limited number of grounds or legal bases for considering the validity of marriage. The following descriptions of the most common of these grounds may help you to prepare your brief statement. The Tribunal is not concerned with pointing fingers or finding moral fault with either spouse, but with learning the truth of the marriage. Any basis or circumstance for a declaration of invalidity must have existed from the very beginning of the marriage, that is, on the wedding day (or the day of convalidation or "blessing").

Please indicate whether or not the following existed on the day of the wedding:

[Please be advised that the following are NOT grounds for invalidity:
Immaturity, incompatibility, lack of communication, infirmity after the fact, infidelity, later onset addictions, wrong choice of spouse, or post-marital trauma (e.g., the death of a child).]

❑ **If at the time of your wedding you did not hold that your marriage would be an exclusive union…** that is one or both of you considered the marriage "open" or considered it acceptable to have other sexual partners during your future marriage, you could write, "an intention against fidelity."

❑ **If at the time of the wedding one or both of you decided to exclude the possibility of having children** during the duration of your marriage, or if you and/or the other party mutually or unilaterally decided to postpone having children until some indeterminate time or condition was met, or if you always used some means of contraception to prevent pregnancy, you could write, "the exclusion of children."

❑ **If there was a pre-marital pregnancy…** If the fact or suspicion of a pre-marital pregnancy caused the decision to marry this might be a factor. Did you feel pressured to marry because of the pregnancy, whether it was internal pressure or pressure from someone else? If so, you could write, "pressure to marry because of pregnancy."

❑ **If at the time of the wedding there were serious problems with addictions…**If the problems affected one or both of you in your decision making ability, or in your ability to function normally, or if they prevented one or both of you from being able to fulfill the basic obligations of marriage, you could write, "alcohol (and/or drug) abuse which prevented fulfilling the basic obligations of marriage," or "alcohol (and/or drug) abuse which prevented sound decision-making at the time of marriage." It is important to state when the addiction started. **Please note, the use of this ground on either party will require a psychological/psychiatric evaluation by a tribunal appointed doctor at your expense, to be paid directly to the doctor (approx. $600).**

❑ **If psychological/psychiatric illness affected the party(ies) or marriage…** A person must be capable of living out the commitment of marriage, including being a spouse and a parent, even with illness. If serious psychiatric illness prevented either you or your former spouse from understanding or fulfilling the basic obligations of marriage, you could write, "serious psychiatric or psychological illness which prevented the fulfillment of the basic obligations of marriage." **Please note, the use of this ground on either party will require a psychological/psychiatric evaluation by a tribunal appointed doctor at your expense, to be paid directly to the doctor (approx. $300-$450).** Other medical proofs may also be necessary.

❑ **If fraud led to the marriage…** If you or your former spouse had been told a lie in order to convince you to marry, or if something important was intentionally concealed in order to get you to marry, you could write, "fraud intended to lead to marriage."

❑ **If at the time of your marriage, you or your former spouse did not hold that your marriage was "until death"…** If in fact you or your former spouse excluded from your marriage all probability of marital permanence, you can write, "exclusion of the permanence of marriage."

- ❑ **If homosexuality was an issue in the marriage…** Homosexuality is not a ground of invalidity in itself, but confusion over sexuality and self-image can prevent or interfere with the marital relationship and marital intimacy. If this was a factor in the marriage, you could write, "inability to fulfill the obligations of a (husband/wife) because of homosexuality." It is important to include whether homosexual feelings or confusion existed prior to the marriage, how soon into the marriage this became a problem, and whether the marriage ended principally because of homosexuality.

- ❑ **If you did not intend to marry at all…** Sometimes a couple will go through a legal or religious marriage ceremony for a reason connected with immigration, insurance, or finances, and not out of the idea of marriage itself. In other words, they were pretending to marry. If such was the case in this marriage, you could write, "simulation of marriage for reasons of (immigration/insurance/_____)."

- ❑ **If one or both of you entered this marriage against your will…** If either spouse, or both, did not agree to marry freely but because of some force, or out of fear (even a deep-seated fear of displeasing someone important to you such as a parent or clergyman), you could write, "force (or fear) to enter marriage." This might apply also if the marriage was arranged (as happens in some cultures) and you or your spouse did not want to marry.

- ❑ **Error of person or error quality principally and directly intended…** If your former spouse falsified his or her identity at the time of marriage, such that you thought you were marrying a different person, you could write, "error of person." If in choosing to marry your former spouse you were actually focused primarily on some quality that you thought the other had (i.e., she is a doctor, he is a vegetarian), but later discovered that he or she was not, and **you or the Respondent desired that quality more than marriage itself**, you could write, "error principally and directly intended," also indicating the quality about which you were in error.

- ❑ **Condition…** If you placed any condition on the marriage—either concerning the past, present or future, you could write, "past/present/future condition," also indicating what the condition concerned and whether or not the condition was actually fulfilled.

ATTENTION!!

The next page is the most important page in this packet. You must fill it out completely. Be sure to include:

1) ***Reason for invalidity*** *(box in the middle of the page)*

2) ***Names of at least 2 witnesses*** *(box below the above)*

3) ***Signature and date*** *(at the bottom of the page)*

Petition

The Tribunal will normally send a copy of this Petition page to the Respondent when the trial begins.

PETITIONER Your full name (Family name also, if applicable)	RESPONDENT Full name of spouse to this marriage (Family Name)
Address (street, city, state, zip)	City of Residence (Respondent)

I hereby request that the Metropolitan Tribunal of the Archdiocese of New York accept this petition to pronounce, according to the Canon Law of the Catholic Church, that the marriage between the spouses named above was not valid.
The marriage (convalidation) took place on the following date and at the following place:

Date (mm/dd/yyyy)	City, State, and Country
(Arch)diocese	Church Name and Address

In making this petition, I contend that the marriage was invalid for the reason(s) contained in my application and as summarized below.
*(You **MUST** 1) include a very **brief explanation** in the **box below** of why you chose the ground(s)*
*2) **indicate** the **party** on which the ground(s) you allege apply: yourself, your former spouse or both)*

WITNESSES: I name the following witnesses who are knowledgeable about the above ground(s) and who are willing to appear and offer sworn testimony: (This MUST be completed.)

1	2
3	4

_____ _____
Petitioner Signature **Date**

_____ _____
** **Respondent Signature** (**ONLY if** respondent consents to **grounds**) **Date**

** *If Respondent signs: Respondent's signature must be **notarized** and a **copy of Respondent's gov't issued ID** must be included*

For Tribunal Use:
Date Received _____ Date Accepted by Judicial Vicar _____

_____
Very Rev. Msgr. Robert J. Hospodar, JCL
Judicial Vicar

Section 4

Witnesses

It is absolutely necessary to provide the names and complete addresses of several witnesses (preferably at least four) who can support the grounds of your case. The best witnesses are friends, co-workers, family members, roommates, or others who knew both you and the Respondent before and during the marriage. Please contact your witnesses personally and inform them that you will give their names and addresses to the Tribunal. If you do not contact them, they may be surprised and even angered when the Tribunal cites them. Their refusal to answer questions can seriously delay or affect the outcome of your case.

Please apprise the witnesses of the following:

1) They must appear in person to testify about their knowledge of the marriage
2) Their interview should preferably be on the same day as your own interview with the Judge. You are responsible for coordinating this with your witnesses.

Testimony is taken Monday - Friday during normal business hours in accordance with the judge's schedule.

Witnesses who do not live within the Archdiocese will be given the opportunity to provide testimony in the Tribunal of their local diocese. **Neither "telephone testimony" nor written statements are permitted to take the place of oral testimony.**

Testimony can be taken via **Skype/ FaceTime/ WhatsApp/ Zoom**. To do so, you must contact the Metropolitan Tribunal at tribunal@archny.org for procedures and rules to verify that you qualify.

*** PLEASE NOTE: Witness cell numbers are preferable ***

1	Title:	First Name:	Middle:	Last Name:
Street Address				Email:
City:		State:	Zip:	Country:
*** Telephone #( ) cell preferred		Gender	How long has this person known you?	
Relationship to you Relationship to the Respondent				
Did this person know both you and the Respondent at the time of the marriage? ☐ Yes ☐ No What will this person be able to tell the Tribunal, in general terms?				
Did this person agree to be a witness and to testify at the Tribunal Office?				

*** PLEASE NOTE: Witness cell numbers are preferable ***

2	Title:	First Name:	Middle:	Last Name:
Street Address				Email:
City:		State:	Zip:	Country:
*** Telephone #( ) cell preferred		Gender	How long has this person known you?	
Relationship to you Relationship to the Respondent				
Did this person know both you and the Respondent at the time of the marriage? ☐ Yes ☐ No What will this person be able to tell the Tribunal, in general terms?				
Did this person agree to be a witness and to testify at the Tribunal Office?				

Witnesses (continued)

*** PLEASE NOTE: Witness cell numbers are preferable ***

3	Title:	First Name:	Middle:	Last Name:
Street Address				Email:
City:		State:	Zip:	Country:
*** Telephone #( ) cell preferred		Gender	How long has this person known you?	
Relationship to you Relationship to the Respondent				
Did this person know both you and the Respondent at the time of the marriage? ☐ Yes ☐ No What will this person be able to tell the Tribunal, in general terms?				
Did this person agree to be a witness and to testify at the Tribunal Office?				

*** PLEASE NOTE: Witness cell numbers are preferable ***

4	Title:	First Name:	Middle:	Last Name:
Street Address				Email:
City:		State:	Zip :	Country:
*** Telephone #( ) cell preferred		Gender	How long has this person known you?	
Relationship to you Relationship to the Respondent				
Did this person know both you and the Respondent at the time of the marriage? ☐ Yes ☐ No What will this person be able to tell the Tribunal, in general terms?				
Did this person agree to be a witness and to testify at the Tribunal Office?				

*** PLEASE NOTE: Witness cell numbers are preferable ***

5	Title:	First Name:	Middle:	Last Name:
Street Address				Email:
City:		State:	Zip:	Country:
*** Telephone #( ) cell preferred		Gender	How long has this person known you?	
Relationship to you Relationship to the Respondent				
Did this person know both you and the Respondent at the time of the marriage? ☐ Yes ☐ No What will this person be able to tell the Tribunal, in general terms?				
Did this person agree to be a witness and to testify at the Tribunal Office?				

Witnesses (continued)

Professional or Expert Witnesses — If you saw a Professional **about issues related to your grounds** at any time before or during the marriage, please answer the following:

Did you see a Licensed Counselor, Psychologist, Psychiatrist, or Clinical Social Worker?

☐No ☐Yes, I did, without the Respondent ☐Yes, we did together ☐Yes, the Respondent did, without me

Did you see a Medical Doctor or other health professional (about issues related to this marriage) within the past 5 years?

☐No ☐Yes, I did, without the Respondent ☐Yes, we did together ☐Yes, the Respondent did, without me

If yes to any of the above, would you be willing to sign a Release from Confidentiality Form to allow that person to offer testimony that is relevant to your case (if the Tribunal considers it necessary and helpful to the case)?

PLEASE NOTE THAT IF THE RESPONDENT WAS SEEN WITH YOU OR INDIVIDUALLY, IT WILL BE NECESSARY FOR THE RESPONDENT TO SIGN A RELEASE AND AUTHORIZATION FOR A PROFESSSIONAL WITNESS TO OFFER TESTIMONY.

If psychiatric or psychological illness played a role in the problems that existed at the time of this marriage, it will be helpful to the case if you submit certified (notarized) copies of any medical or hospital records in your possession which show a diagnosis and treatment dates. If physical abuse was present in the marriage, it will be helpful to submit certified (notarized) copies of any records in your possession regarding this, such as medical, hospital, or police records. **Photocopies of records, which are not notarized, will not be accepted.** Only original documents or notarized copies of the originals will be accepted by the Tribunal.

Pastor/Parochial Vicar **(applicable to Catholics only)**

If you are Catholic, please arrange to meet with your pastor/associate vicar to discuss the application/petition prior to submission.

I have met with the petitioner and confirm the following:

- ❑ I confirm that I have read the Petition on page 16.
- ❑ I confirm that the box in the middle of the Petition contains canonical grounds for nullity as listed on pgs 14-15.
- ❑ I confirm that the petitioner has signed and dated the petition.

_____ _____

Signature Date

_____

Parish

METROPOLITAN TRIBUNAL – ARCHDIOCESE OF NEW YORK
1011 First Avenue, New York, NY 10022
(212) 371-1000 Extension 3200

POLICY STATEMENT

I, _____, the Petitioner, understand that:

- A declaration of nullity cannot be issued unless I have provided evidence sufficient to overcome the presumption of validity of my marriage.
- My submitting the Petition does not guarantee that a declaration of nullity will be granted.
- The other party (respondent) has the right to know why I allege our marriage is invalid and will receive a copy of my Petition; furthermore, she/he will be invited to participate in these proceedings and all his/her rights will be protected as well as mine, including the right to inspect the Acts of the case (declarations, testimonies, etc.)
- I cannot set (even tentatively) a date for marriage or validation in the Catholic Church until the nullity of the previous marriage/s has/have been established with certainty according to the laws of the Church. I understand that due to the COVID crisis and personnel shortages, the process can take 2 years or, for difficult cases, possibly longer.
- No assurance of the outcome or the time it will take to complete the process can be given.
- If there is a judgment granting the declaration of nullity, it may contain a clause delaying or restricting permission to remarry in the Church.
- If the grounds on either myself or the respondent are psychological in nature and require a psychological/ psychiatric evaluation, **I am fully responsible for all fees** charged by a tribunal appointed doctor. In addition, these **fees are to be paid directly to the doctor** (approx. $700).

I hereby certify that:

- I have contacted the witnesses whose names and addresses I have supplied, and they agree to participate.
- I understand that I am not to discuss the facts of my case with them.
- I have kept a photocopy of the materials I am submitting.

And I swear to the truthfulness of the evidence I am submitting.

Signature: _____ **Date**: _____

METROPOLITAN TRIBUNAL – ARCHDIOCESE OF NEW YORK
1011 First Avenue, New York, NY 10022
(646) 794-3200

CONFIDENTIALITY AGREEMENT

I _____, the Petitioner in this case, understand that this trial is being conducted in accordance with the Canon Law of the Roman Catholic Church, and that these proceedings are of a purely spiritual and religious nature, and that I am being given the opportunity to review the documents, testimony, and procedural acts of the case not known to me for the sole purpose of assisting me in the effective exercise of my rights before the Tribunal. I hereby undertake and promise as follows:

1) I voluntarily waive now and in the future any right under law to the subpoena or judicial discovery of the documents and evidence of this case apart from a case in this ecclesiastical tribunal. This waiver is given without reservation or condition.

2) I agree to keep confidential and secret any information that I shall learn in the course of these proceedings. To that end, I affirm that I shall make no copies or recordings of information or conversations regarding my case. I promise not to use information that I may learn through this case in any other forum or for any other purpose.

3) I promise not to discuss, publish, or disseminate through any means the information that I may learn here. I promise not to make use of this information in any way other than to prepare and argue my case before the tribunals of the Catholic Church. In all other places and for all other purposes I agree to keep all information I shall learn from this case confidential.

4) I understand that there may be expert reports and reviews, including psychological or other evaluations, that may be created or submitted in connection with this case, and I hereby intentionally waive any and all right to review them or have any form of access to them for any purpose.

5) I recognize that if I should violate or threaten to violate this agreement, I consent to the authority of the tribunal of the Archdiocese of New York to impose any penal remedy, penance, and/or penalty for this offense, as permitted by the canon law of the Church, and to seek relief or remedy in any court of law or equity.

6) I assume in perpetuity any responsibility for damage inflicted to others by my intentional or negligent release of information learned through this case and agree to hold harmless from such damages the Archdiocese of New York as well as all persons who have offered testimony or documents in this case, and all officers and agents of the Metropolitan Tribunal of the Archdiocese of New York.

I acknowledge that I have read the above provisions of this agreement and policy, and I fully understand them, and I further freely agree to abide by them now and in the future. I do so solemnly attest before God and my conscience.

SO HELP ME GOD.

_____ _____
***** Signature Date

***** Petiitioner to sign when submitting application
***** Respondent to sign when giving testimony or viewing the acts

Checklist

The following are REQUIRED in order to submit your case. If any of the following are missing, **your application will be returned**

❑❶ **Completed Petitioner's Information Form (no blank spaces) in black or blue ink**

❑❷ **Petition (pg. 16): Signed and dated with original signature**

❑❸ **Petition (pg. 16): Entered at least one of the grounds from pgs 14-15 in the middle box**

❑❹ **Policy Statement (pg 20) & Confidentiality Statement: Signed and dated with original signature**

❑❺ **Application Fee (non-refundable):** (due whether submitting a petition before or after Feb. 1, 2021)
$100 check, payable to the Archdiocese of NY

The following Documents:

❑❻ **Marriage Certificate (Church) - Original updated for the marriage in question**

❑❼ **Marriage License and/or Certificate (State) - Original for the marriage in question Long form only, see next 2 pages)**

❑❽ **Divorce and/or Civil Annulment Decree for the marriage in question**

❑❾ **Baptismal Certificate of Petitioner - Original updated (issued within the past 6 months). A copy WILL NOT be accepted**

Please make and retain a copy of all forms and documents.

As of February 1, 2021:

The following fees will be incurred for formal cases heard before the Metropolitan Tribunal of the Archdiocese of New York:

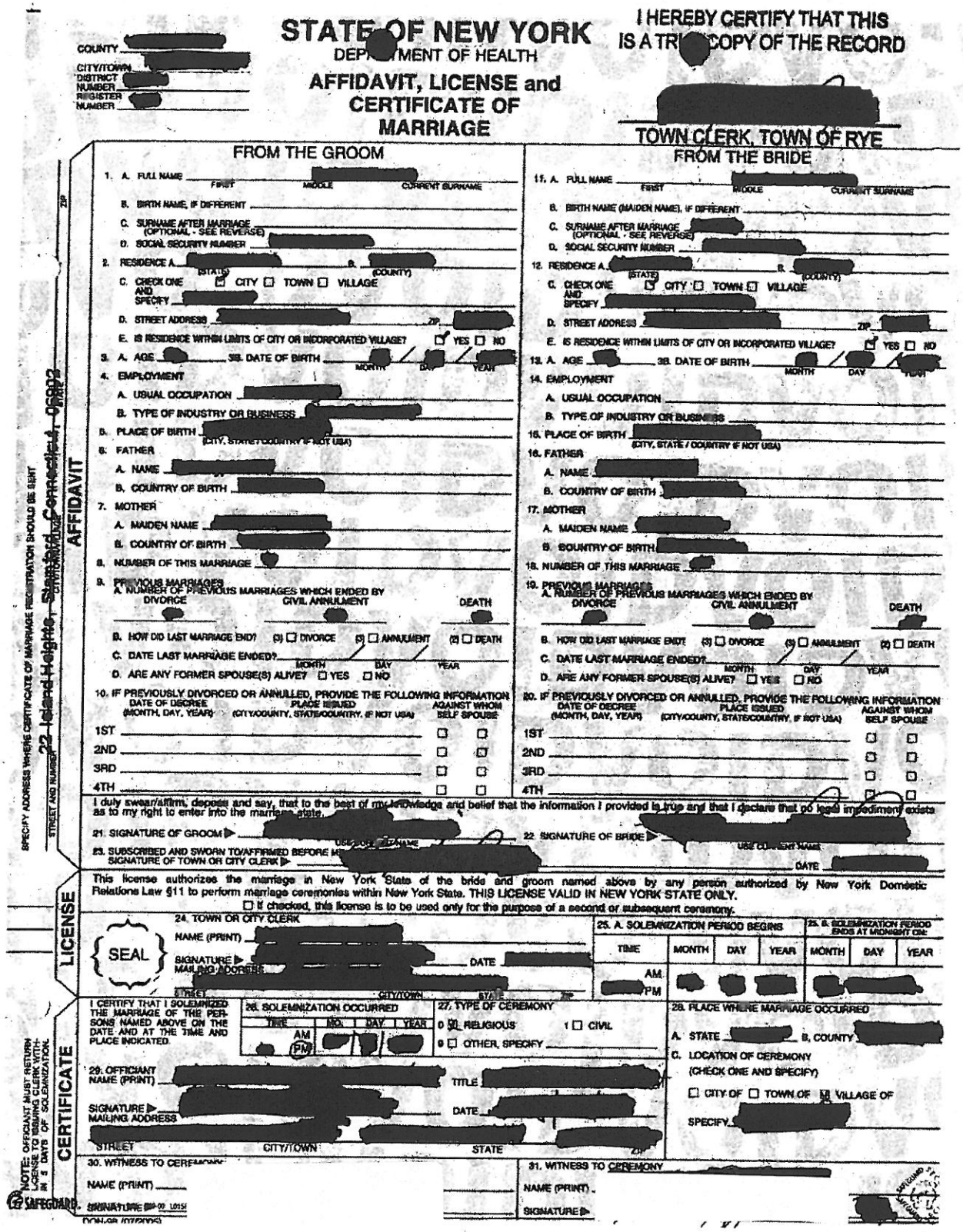
$100 Application fee (non-refundable) to be paid when an application is submitted

$650 Administrative fee to be paid according to a mutually agreed upon installment plan; this fee represents only a portion of the costs incurred. If your finances change and you wish to alter your payment plan, call the Tribunal. No one is ever turned away from the Tribunal because of an inability to pay.

Please indicate how you will pay the $650 administrative fee:

- ☐ One (1) payment of $650.
- ☐ Two (2) installments: $325 when the case is accepted and $325 when testimony has been collected.
- ☐ Ten (10) monthly installments of $65 each, payable the first day of the month (starting next month).
- ☐ ____monthly installments of $ _____each, payable on the _____day of the month.

LONG FORM
(Acceptable)



STATE OF NEW YORK
DEPARTMENT OF HEALTH
AFFIDAVIT, LICENSE and CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THIS IS A TRUE COPY OF THE RECORD
TOWN CLERK, TOWN OF RYE

COUNTY
CITY/TOWN
DISTRICT NUMBER
REGISTER NUMBER

FROM THE GROOM

1. A. FULL NAME (FIRST, MIDDLE, CURRENT SURNAME)
B. BIRTH NAME, IF DIFFERENT
C. SURNAME AFTER MARRIAGE (OPTIONAL - SEE REVERSE)
D. SOCIAL SECURITY NUMBER
2. RESIDENCE A. (STATE) B. (COUNTY)
C. CHECK ONE ☐ CITY ☐ TOWN ☐ VILLAGE AND SPECIFY
D. STREET ADDRESS ZIP
E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? ☐ YES ☐ NO
3. A. AGE B. DATE OF BIRTH (MONTH, DAY, YEAR)
4. EMPLOYMENT
A. USUAL OCCUPATION
B. TYPE OF INDUSTRY OR BUSINESS
5. PLACE OF BIRTH (CITY, STATE / COUNTRY IF NOT USA)
6. FATHER
A. NAME
B. COUNTRY OF BIRTH
7. MOTHER
A. MAIDEN NAME
B. COUNTRY OF BIRTH
8. NUMBER OF THIS MARRIAGE
9. PREVIOUS MARRIAGES
A. NUMBER OF PREVIOUS MARRIAGES WHICH ENDED BY DIVORCE / CIVIL ANNULMENT / DEATH
B. HOW DID LAST MARRIAGE END? (3) ☐ DIVORCE (3) ☐ ANNULMENT (2) ☐ DEATH
C. DATE LAST MARRIAGE ENDED? (MONTH, DAY, YEAR)
D. ARE ANY FORMER SPOUSE(S) ALIVE? ☐ YES ☐ NO
10. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION

	DATE OF DECREE (MONTH, DAY, YEAR)	PLACE ISSUED (CITY/COUNTY, STATE/COUNTRY, IF NOT USA)	AGAINST WHOM	SELF	SPOUSE
1ST				☐	☐
2ND				☐	☐
3RD				☐	☐
4TH				☐	☐

FROM THE BRIDE

11. A. FULL NAME (FIRST, MIDDLE, CURRENT SURNAME)
B. BIRTH NAME (MAIDEN NAME), IF DIFFERENT
C. SURNAME AFTER MARRIAGE (OPTIONAL - SEE REVERSE)
D. SOCIAL SECURITY NUMBER
12. RESIDENCE A. (STATE) B. (COUNTY)
C. CHECK ONE ☐ CITY ☐ TOWN ☐ VILLAGE AND SPECIFY
D. STREET ADDRESS ZIP
E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? ☐ YES ☐ NO
13. A. AGE B. DATE OF BIRTH (MONTH, DAY, YEAR)
14. EMPLOYMENT
A. USUAL OCCUPATION
B. TYPE OF INDUSTRY OR BUSINESS
15. PLACE OF BIRTH (CITY, STATE / COUNTRY IF NOT USA)
16. FATHER
A. NAME
B. COUNTRY OF BIRTH
17. MOTHER
A. MAIDEN NAME
B. COUNTRY OF BIRTH
18. NUMBER OF THIS MARRIAGE
19. PREVIOUS MARRIAGES
A. NUMBER OF PREVIOUS MARRIAGES WHICH ENDED BY DIVORCE / CIVIL ANNULMENT / DEATH
B. HOW DID LAST MARRIAGE END? (3) ☐ DIVORCE (3) ☐ ANNULMENT (2) ☐ DEATH
C. DATE LAST MARRIAGE ENDED? (MONTH, DAY, YEAR)
D. ARE ANY FORMER SPOUSE(S) ALIVE? ☐ YES ☐ NO
20. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION

	DATE OF DECREE (MONTH, DAY, YEAR)	PLACE ISSUED (CITY/COUNTY, STATE/COUNTRY, IF NOT USA)	AGAINST WHOM	SELF	SPOUSE
1ST				☐	☐
2ND				☐	☐
3RD				☐	☐
4TH				☐	☐

AFFIDAVIT

I duly swear/affirm, depose and say, that to the best of my knowledge and belief that the information I provided is true and that I declare that no legal impediment exists as to my right to enter into the marriage state.

21. SIGNATURE OF GROOM ▶ 22. SIGNATURE OF BRIDE ▶
USE CURRENT NAME
23. SUBSCRIBED AND SWORN TO/AFFIRMED BEFORE ME
SIGNATURE OF TOWN OR CITY CLERK ▶ DATE

LICENSE

This license authorizes the marriage in New York State of the bride and groom named above by any person authorized by New York Domestic Relations Law §11 to perform marriage ceremonies within New York State. THIS LICENSE VALID IN NEW YORK STATE ONLY.

☐ If checked, this license is to be used only for the purpose of a second or subsequent ceremony.

SEAL

24. TOWN OR CITY CLERK
NAME (PRINT)
SIGNATURE ▶ DATE
MAILING ADDRESS
STREET CITY/TOWN STATE ZIP

25. A. SOLEMNIZATION PERIOD BEGINS — TIME, MONTH, DAY, YEAR
25. B. SOLEMNIZATION PERIOD ENDS AT MIDNIGHT ON: MONTH, DAY, YEAR

CERTIFICATE

I CERTIFY THAT I SOLEMNIZED THE MARRIAGE OF THE PERSONS NAMED ABOVE ON THE DATE AND AT THE TIME AND PLACE INDICATED.

26. SOLEMNIZATION OCCURRED — TIME (AM / PM), MO., DAY, YEAR
27. TYPE OF CEREMONY: 0 ☐ RELIGIOUS 1 ☐ CIVIL 9 ☐ OTHER, SPECIFY
28. PLACE WHERE MARRIAGE OCCURRED
A. STATE B. COUNTY
C. LOCATION OF CEREMONY (CHECK ONE AND SPECIFY)
☐ CITY OF ☐ TOWN OF ☐ VILLAGE OF
SPECIFY

29. OFFICIANT NAME (PRINT) TITLE
SIGNATURE ▶ DATE
MAILING ADDRESS
STREET CITY/TOWN STATE ZIP

30. WITNESS TO CEREMONY
NAME (PRINT)
SIGNATURE

31. WITNESS TO CEREMONY
NAME (PRINT)
SIGNATURE ▶

NOTE: OFFICIANT MUST RETURN LICENSE TO ISSUING CLERK WITHIN 5 DAYS OF SOLEMNIZATION.

SPECIFY ADDRESS WHERE CERTIFICATE OF MARRIAGE REGISTRATION SHOULD BE SENT
STREET AND NUMBER 22 Island Heights CITY/TOWN Stamford STATE Connecticut ZIP 06902

SAFEGUARDS

Long Form

(Acceptable)

COUNTY _____
CITY/TOWN _____
DISTRICT NUMBER _____
REGISTER NUMBER _____

STATE OF NEW YORK
DEPARTMENT OF HEALTH
AFFIDAVIT, LICENSE and CERTIFICATE OF MARRIAGE

STATE FILE NUMBER
(THIS SPACE FOR STATE USE ONLY)

☐ SUPPLEMENTAL FILE _____

SPECIFY ADDRESS WHERE CERTIFICATE OF MARRIAGE REGISTRATION SHOULD BE SENT

AFFIDAVIT

BRIDE/GROOM/SPOUSE	BRIDE/GROOM/SPOUSE
1. A. FULL NAME (FIRST / MIDDLE / CURRENT SURNAME)	11. A. FULL NAME (FIRST / MIDDLE / CURRENT SURNAME)
B. BIRTH NAME, IF DIFFERENT	B. BIRTH NAME, IF DIFFERENT
C. SURNAME AFTER MARRIAGE (OPTIONAL - SEE REVERSE)	C. SURNAME AFTER MARRIAGE (OPTIONAL - SEE REVERSE)
D. SOCIAL SECURITY NUMBER	D. SOCIAL SECURITY NUMBER
2. RESIDENCE A. _____ (STATE) B. _____ (COUNTY)	12. RESIDENCE A. _____ (STATE) B. _____ (COUNTY)
C. CHECK ONE CITY ☐ TOWN ☐ VILLAGE ☐ AND SPECIFY	C. CHECK ONE CITY ☐ TOWN ☐ VILLAGE ☐ AND SPECIFY
D. STREET ADDRESS ZIP	D. STREET ADDRESS ZIP
E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? YES ☐ NO ☐	E. IS RESIDENCE WITHIN LIMITS OF CITY OR INCORPORATED VILLAGE? YES ☐ NO ☐
3. A. AGE _____ B. DATE OF BIRTH _____ (MM/DD/YYYY) C. SEX (OPTIONAL) _____	13. A. AGE _____ B. DATE OF BIRTH _____ (MM/DD/YYYY) C. SEX (OPTIONAL) _____
4. EMPLOYMENT	14. EMPLOYMENT
A. USUAL OCCUPATION	A. USUAL OCCUPATION
B. TYPE OF INDUSTRY OR BUSINESS	B. TYPE OF INDUSTRY OR BUSINESS
5. PLACE OF BIRTH (CITY, STATE / COUNTRY, IF NOT USA)	15. PLACE OF BIRTH (CITY, STATE / COUNTRY, IF NOT USA)
6. FATHER OR PARENT	16. FATHER OR PARENT
A. NAME (OR MAIDEN NAME, IF APPLICABLE)	A. NAME (OR MAIDEN NAME, IF APPLICABLE)
B. COUNTRY OF BIRTH	B. COUNTRY OF BIRTH
7. MOTHER OR PARENT	17. MOTHER OR PARENT
A. NAME (OR MAIDEN NAME, IF APPLICABLE)	A. NAME (OR MAIDEN NAME, IF APPLICABLE)
B. COUNTRY OF BIRTH	B. COUNTRY OF BIRTH
8. NUMBER OF THIS MARRIAGE	18. NUMBER OF THIS MARRIAGE
9. PREVIOUS MARRIAGES	19. PREVIOUS MARRIAGES
A. NUMBER OF PREVIOUS MARRIAGES WHICH ENDED BY DIVORCE: _____ CIVIL ANNULMENT: _____ DEATH: _____	A. NUMBER OF PREVIOUS MARRIAGES WHICH ENDED BY DIVORCE: _____ CIVIL ANNULMENT: _____ DEATH: _____
B. HOW DID LAST MARRIAGE END? DIVORCE ☐ (3) ANNULMENT ☐ (3) DEATH ☐ (2)	B. HOW DID LAST MARRIAGE END? DIVORCE ☐ (3) ANNULMENT ☐ (3) DEATH ☐ (2)
C. DATE LAST MARRIAGE ENDED? _____ (MM/DD/YYYY)	C. DATE LAST MARRIAGE ENDED? _____ (MM/DD/YYYY)
D. ARE ANY FORMER SPOUSE(S) ALIVE? YES ☐ NO ☐	D. ARE ANY FORMER SPOUSE(S) ALIVE? YES ☐ NO ☐
10. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION: DATE OF DECREE (MONTH, DAY, YEAR) / PLACE ISSUED (CITY/COUNTY, STATE/COUNTRY, IF NOT USA) / AGAINST WHOM: SELF / SPOUSE	20. IF PREVIOUSLY DIVORCED OR ANNULLED, PROVIDE THE FOLLOWING INFORMATION: DATE OF DECREE (MONTH, DAY, YEAR) / PLACE ISSUED (CITY/COUNTY, STATE/COUNTRY, IF NOT USA) / AGAINST WHOM: SELF / SPOUSE
1ST _____ ☐ ☐	1ST _____ ☐ ☐
2ND _____ ☐ ☐	2ND _____ ☐ ☐
3RD _____ ☐ ☐	3RD _____ ☐ ☐
4TH _____ ☐ ☐	4TH _____ ☐ ☐

I duly swear/affirm, depose and say, that to the best of my knowledge and belief that the information I provided is true and that I declare that no legal impediment exists as to my right to enter into the marriage state.

21. SIGNATURE ▸ _____ (USE CURRENT NAME) 22. SIGNATURE ▸ _____ (USE CURRENT NAME)

23. SUBSCRIBED AND SWORN TO/AFFIRMED BEFORE ME
SIGNATURE OF TOWN OR CITY CLERK ▸ _____ DATE _____

LICENSE

This license authorizes the marriage in New York State of the parties named above by any person authorized by New York State Domestic Relations Law § 11 to perform marriage ceremonies within New York State. THIS LICENSE VALID IN NEW YORK STATE ONLY.

☐ If checked, this license is to be used only for the purpose of a second or subsequent ceremony.

24. TOWN OR CITY CLERK
SEAL
NAME (PRINT) _____
SIGNATURE ▸ _____ DATE _____
MAILING ADDRESS: _____ (STREET) _____ (CITY/TOWN) _____ (STATE) _____ (ZIP)

25. A. SOLEMNIZATION PERIOD BEGINS				25. B. SOLEMNIZATION PERIOD ENDS AT MIDNIGHT ON:		
TIME	MONTH	DAY	YEAR	MONTH	DAY	YEAR
AM / PM						

CERTIFICATE

I CERTIFY THAT I SOLEMNIZED THE MARRIAGE OF THE PARTIES NAMED ABOVE ON THE DATE AND AT THE TIME AND PLACE INDICATED.

26. SOLEMNIZATION OCCURRED			
TIME	MONTH	DAY	YEAR
AM / PM			

27. TYPE OF CEREMONY
0 ☐ RELIGIOUS 1 ☐ CIVIL
9 ☐ OTHER, SPECIFY _____

28. PLACE WHERE MARRIAGE OCCURRED
A. STATE NEW YORK
B. COUNTY _____
C. LOCATION OF CEREMONY (CHECK ONE AND SPECIFY)
CITY ☐ TOWN ☐ VILLAGE ☐
OF (SPECIFY) _____ (NAME OF LOCALITY)

29. OFFICIANT NAME (PRINT) _____ TITLE _____
SIGNATURE ▸ _____ DATE _____
MAILING ADDRESS: _____ (STREET) _____ (CITY/TOWN) _____ (STATE) _____ (ZIP)

30. WITNESS TO CEREMONY
NAME (PRINT) _____
SIGNATURE ▸ _____

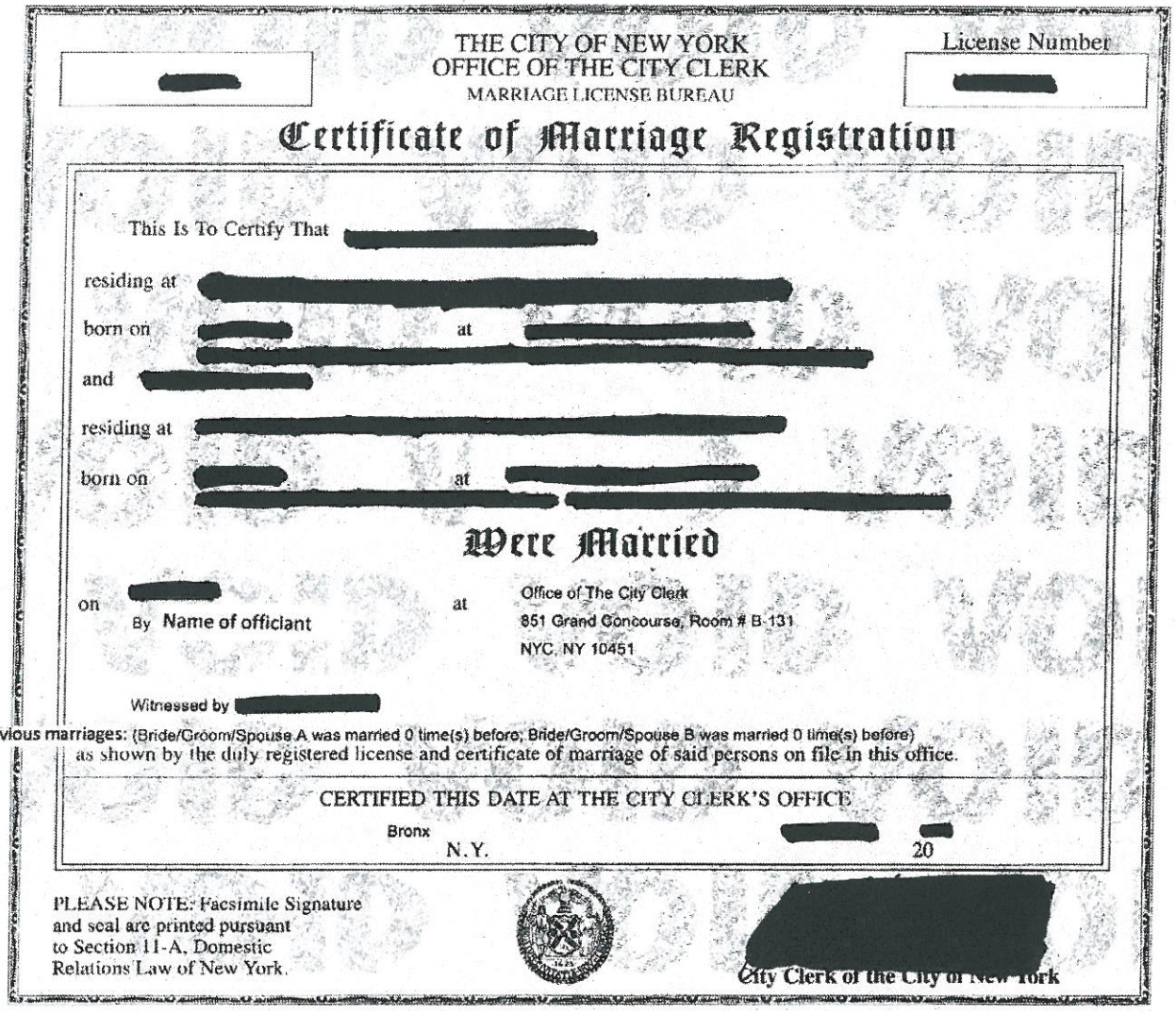
31. WITNESS TO CEREMONY
NAME (PRINT) _____
SIGNATURE ▸ _____

NOTE: OFFICIANT MUST RETURN LICENSE TO ISSUING CLERK WITHIN FIVE (5) DAYS OF SOLEMNIZATION.

DOH-98 (7/2011)

EXTENDED FORM

(Acceptable)
with # of previous marriages



THE CITY OF NEW YORK
OFFICE OF THE CITY CLERK
MARRIAGE LICENSE BUREAU

License Number [redacted]

[redacted]

Certificate of Marriage Registration

This Is To Certify That [redacted]

residing at [redacted]

born on [redacted] at [redacted]

and [redacted]

residing at [redacted]

born on [redacted] at [redacted]

Were Married

on [redacted] at Office of The City Clerk
851 Grand Concourse, Room # B-131
NYC, NY 10451

By Name of officiant

Witnessed by [redacted]

previous marriages: (Bride/Groom/Spouse A was married 0 time(s) before; Bride/Groom/Spouse B was married 0 time(s) before)
as shown by the duly registered license and certificate of marriage of said persons on file in this office.

CERTIFIED THIS DATE AT THE CITY CLERK'S OFFICE

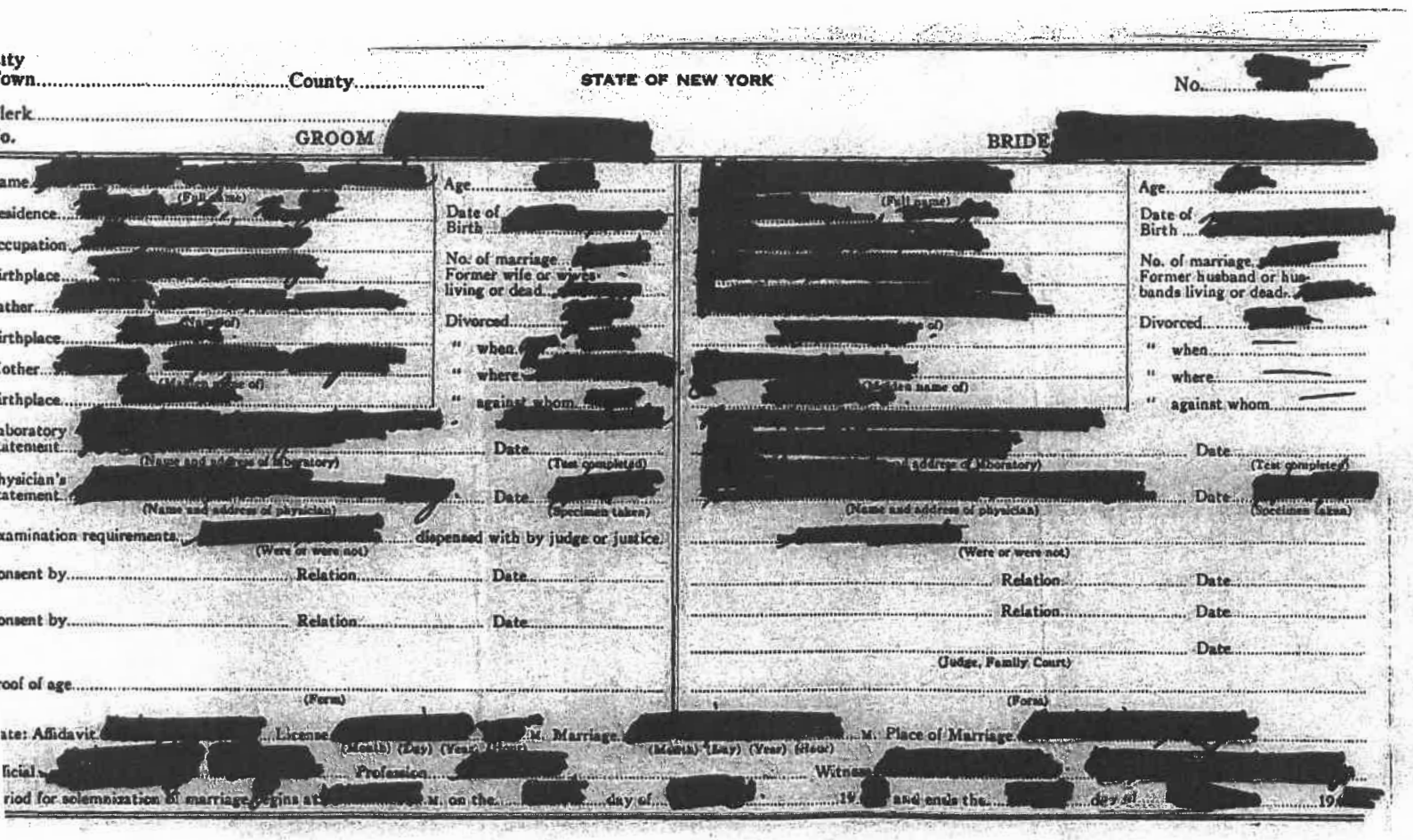
Bronx
N.Y. [redacted] 20

PLEASE NOTE: Facsimile Signature and seal are printed pursuant to Section 11-A, Domestic Relations Law of New York.

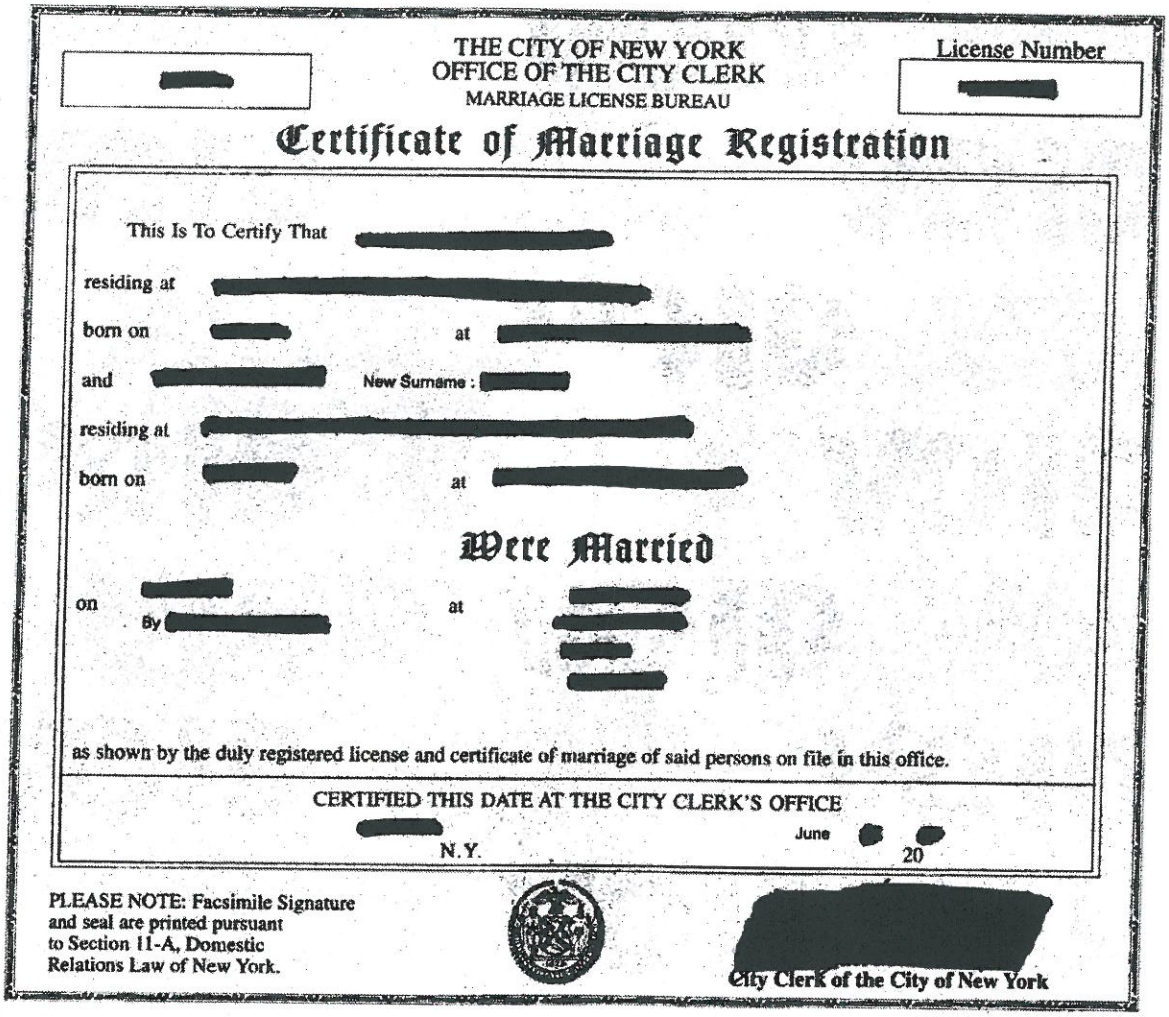
[redacted]
City Clerk of the City of New York

CET-F

Acceptable Form



SHORT FORM
(Not acceptable)



[redacted]

THE CITY OF NEW YORK
OFFICE OF THE CITY CLERK
MARRIAGE LICENSE BUREAU

License Number [redacted]

Certificate of Marriage Registration

This Is To Certify That [redacted]

residing at [redacted]

born on [redacted] at [redacted]

and [redacted] New Surname : [redacted]

residing at [redacted]

born on [redacted] at [redacted]

Were Married

on [redacted] at [redacted]

By [redacted]

as shown by the duly registered license and certificate of marriage of said persons on file in this office.

CERTIFIED THIS DATE AT THE CITY CLERK'S OFFICE

[redacted] N.Y. June [redacted] 20

PLEASE NOTE: Facsimile Signature and seal are printed pursuant to Section 11-A, Domestic Relations Law of New York.

[redacted]

City Clerk of the City of New York

CET-F

SHORT FORM
(Not acceptable)

L5563070

District Name [redacted]

District No. [redacted]

Local Register No. [redacted]

New York State Department of Health

Certified Transcript of Marriage

This is to certify that the persons identified below were married on the date and at the place specified as shown by the duly registered license and certificate of marriage on file in this office

Bride/Groom/Spouse

Name [redacted] (First Middle) Premarriage Surname ____ Birth Name (if different from premarriage surname) ____

☐ Check box if same as premarriage surname.

New Surname (if applicable) [redacted]

Residing at [redacted]

Date of Birth [redacted] (Month Day Year) Place of Birth [redacted] (City, Town or Village/State or Country)

Bride/Groom/Spouse

Name [redacted] (First Middle) Premarriage Surname ____ Birth Name (if different from premarriage surname) ____

Frank

☐ Check box if same as premarriage surname.

New Surname (if applicable) [redacted]

Residing at [redacted]

Date of Birth [redacted] (Month Day Year) Place of Birth [redacted] (City, Town or Village/State or Country)

Date of Marriage [redacted] (Month Day Year) Place of Marriage [redacted] (City, Town or Village), New York

Town or City Clerk [redacted] [redacted] (Month Day Year)

[redacted] marriage was a second or subsequent ceremony.

[redacted] accept this transcript unless the raised seal of the issuing locality is affixed thereon.

Any Alteration Invalidates This Certificate

See Reverse Side For A List of Security Features Used In This Form

DOH-4122 (7/2011)

SEE REVERSE SIDE FOR LIST OF SECURITY FEATURES