



# APPLYING FOR A MARRIAGE LICENSE



Marriage licenses are not immediately available. Please follow the steps below.

## REQUIREMENTS

- ✓ You must be getting married in Waterbury
- ✓ You must know the date of the ceremony
- ✓ The date must be within 65 days of the ceremony
- ✓ You must choose your officiator and have all contact information.  
This may be a member of the clergy or a Justice of the Peace. (Justice of the Peace PDF)
- ✓ You must have ID (ID requirements PDF)

## HOW TO APPLY

(Choose one of the three ways below)

### A. *ONLINE*

- Complete online marriage license application (IQS Application link)
- Email copies of ID's for both parties to [townclerk@waterburyct.org](mailto:townclerk@waterburyct.org)

### B. *PRINT AND EMAIL*

- Print and complete the application for marriage (Marriage license app PDF & spanish )
- Email copies of completed application and ID's for both parties to [townclerk@waterburyct.org](mailto:townclerk@waterburyct.org)

### C. *BY MAIL OR PICK UP*

- You may obtain an application for a marriage license from the Office of Vital Statistics
- Email, mail or drop off copies of completed application and ID's for both parties to the Office of Vital Statistics at the address below.

## FINAL STEP

- Once you have submitted the paperwork our office will contact you and let you know when the license is ready.
- ✓ Both parties must appear in person at the Office of Vital Statistics during normal business hours with their IDs and \$50 Fee (cash, money order, or credit/debit card only)

Office of Vital Statistics

235 Grand St.

Waterbury CT 06702

[townclerk@waterburyct.org](mailto:townclerk@waterburyct.org)

Office Hours Mon.-Fri. 8:30 to 4:30

# THIS IS NOT A MARRIAGE LICENSE

Please email, fax, or mail this completed worksheet to Vital Statistics.  
See the attached instruction page for requirements and details.

## Worksheet to Apply for a Marriage License

### **SPOUSE ONE**

### **SPOUSE TWO**

NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)		
SEX	DATE OF BIRTH (Mo., Day, Year)		AGE		
BIRTHPLACE (State or Country)		EDUCATION (No. Yrs. Completed)		BIRTHPLACE (State or Country)	
		GRADES 1-8	GRADES 9-12	COLLEGE (1-5+)	
RESIDENCE (No. and Street)			RESIDENCE (No. and Street)		
CITY OR TOWN		COUNTY	STATE		
SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO			SUPERVISION OR CONTROL BY GUARDIAN OR CONSERVATOR <input type="checkbox"/> YES <input type="checkbox"/> NO		
FATHER/PARENT FIRST & LAST NAME PRIOR TO FIRST MARRIAGE			FATHER/PARENT FIRST & LAST NAME PRIOR TO FIRST MARRIAGE		
MOTHER/PARENT FIRST & LAST NAME PRIOR TO FIRST MARRIAGE			MOTHER/PARENT FIRST & LAST NAME PRIOR TO FIRST MARRIAGE		
FATHER/PARENT BIRTHPLACE (State or Foreign Country)		MOTHER/PARENT BIRTHPLACE (State or Foreign Country)		FATHER/PARENT BIRTHPLACE (State or Foreign Country)	
NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. <input type="checkbox"/> MARRIAGE 2. <input type="checkbox"/> CIVIL UNION		NO. OF THIS MARRIAGE	NO. OF CIVIL UNIONS
LAST RELATIONSHIP ENDED BY: 1. <input type="checkbox"/> DEATH 2. <input type="checkbox"/> DISSOLUTION 3. <input type="checkbox"/> ANNULMENT 4. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER			LAST RELATIONSHIP ENDED BY: 1. <input type="checkbox"/> DEATH 2. <input type="checkbox"/> DISSOLUTION 3. <input type="checkbox"/> ANNULMENT 4. <input type="checkbox"/> PREVIOUS CIVIL UNION DID NOT END. MARRYING CIVIL UNION PARTNER		
PHONE NUMBER:			PHONE NUMBER:		

### **OFFICIATOR INFORMATION**

OFFICIATOR'S NAME (FIRST) (LAST)
OFFICIATOR'S Telephone Number
TOWN WHERE MARRIAGE CEREMONY WILL BE PERFORMED: DATE OF MARRIAGE:

**Note:** Social Security numbers for both spouses must be provided at the time of the appointment for a marriage license. **Do not email Social Security card copies. Do not email any other documents without removing all Social Security numbers.**

### **FOR OFFICE USE ONLY**

--	--