



**Town of East Hartford**  
**Registrar of Vital Statistics**  
740 Main Street  
East Hartford, CT 06108  
(860) 291-7230

## APPLICATION FOR MARRIAGE CERTIFICATE

**Fee:** \$20.00 cash or check made payable to "**East Hartford Town Clerk.**"  
\_\_\_\_\_ # of Certified Copies

### **VALID GOVERNMENT-ISSUED PHOTO IDENTIFICATION OF APPLICANT IS REQUIRED**

**Photographic identification may be substituted by at least two of the following documents:**  
automobile registration, copy of utility bill showing name and address, checking account deposit slip stating name and address or any other valid government-issued ID.

### **I AM APPLYING FOR THE MARRIAGE CERTIFICATE OF:**

SPOUSE - Full name as it appears on the certificate:

first/middle/last) \_\_\_\_\_

SPOUSE - Full name as it appears on the certificate:

first/middle/last) \_\_\_\_\_

Place of Marriage: (town/state) \_\_\_\_\_

Date of Marriage (mm/dd/yy) \_\_\_\_\_

### **I DECLARE THAT...**

- This is my own marriage certificate.
- This is my child's marriage certificate.
- I am an immediate family member – spouse, child by blood or sibling.
- I am a person authorized by the Dept. of Health & Chief Medical Examiner Rep. (*Signed letter on letterhead required.*)
- an authorized CT genealogist. (*Must produce a valid, signed card.*)
- Other. \_\_\_\_\_

**SIGNATURE** of Applicant \_\_\_\_\_ Phone # \_\_\_\_\_

**ADDRESS** of Applicant (street/town/state) \_\_\_\_\_



**If requesting by mail, include:** (1) Completed application form, (2) check or money order, (3) Self-addressed, stamped envelope, (4) legible copy of photo ID. Mail to the address above.

### **FOR OFFICE USE ONLY:**

Date certified copy issued: \_\_\_\_\_ Person issuing copy: \_\_\_\_\_

Form(s) of identification used: \_\_\_\_\_