

Ashtabula County Court of Common Pleas Judge Albert S. Camplese

Andrew J. Misiak Richard L. Dana
Court Administrator Magistrate

Probate Division

	MARRIAGE LICENSE APPLICATION Ashtabula County, Ohio			
OFFICE USE ONLY				
_Application Received:	[] Cash [] Money Order	[] Debit/Credit Card		
Date of Appointment:	Receipt #:			
All Documentation has been provided? [] Yes [] No:	New Appointment Date:			

*** DO NOT APPLY FOR YOUR MARRIAGE LICENSE MORE THAN 60 DAYS PRIOR TO THE CEREMONY DATE ***

- Applicants must complete the marriage license application completely and submit by email, fax, or in-person.
 - You must set up an appointment. Appointments may not be the same day as the submittal of your application.
- At the time of appointment, the applicants must provide all required information and documentation.
- Ohio Residents must obtain a license within the county where one of the applicants resides.
 - > At least one applicant must be a resident of Ashtabula County for the license to be issued by the Ashtabula County Probate Court.
 - ➤ The license is valid anywhere in the State of Ohio for 60 days from the day of issuance.
- Out of State Residents If you are getting married in Ohio, you must obtain a license in the county where the ceremony will take place.
- Applicants under the age of 18 You must file a petition for consent to the marriage of a minor with the Ashtabula County Juvenile Court. A
 copy of the order must be provided prior to filing the marriage license application.
- Applicants may not be nearer of kin than second cousins and may not have a living spouse.

DOCUMENTATION REQUIRED AT TIME OF APPOINTMENT: (All documents must be in English or translated to English)

- Valid Identification (Driver's License, State ID, Passport, VISA/Green Card)
- If application and Identification addresses do not match, a verification of current address must be submitted. (ex. Current Utility Bill)
- Birth Certificate
- Social Security Card (Only needed if number is not provided on application)
- Prior Marriage Documentation: Divorce Decree / Death Certificate (You must supply all previous marriage information)

MARRIAGE LICENSE FEE \$50.00 - Includes 5 certified copies of Marriage Record - \$2.00 per additional certified copy

• Cash, Money Order, Debit / Credit Card (Please be aware that there is a convenience fee per debit/credit card transaction)

Application may be submitted in-person, by email, or fax. A Probate Clerk will call you to set up your appointment.

All required documentation must be provided at the date of the scheduled appointment.

MARRIAGE LICENSE APPLICATION

Ashtabula County, Ohio

Date	of Wedding Ceremony:				ML	
*** Do not apply for your marriage license more than 60 days prior to the ceremony date. *** License Number						
GRO	OM / APPLICANT 1					
	First Name Middle Name Last Name		Last Name			
	Social Security Number		Date of Birth		Age	
. INI	Birth Place (City/State)					
GROOM / APPLICANT INFORMATION	Street Address				City	
	State	Zip Code			County	
	Phone #		Email Address	Email Address		
SRO(Occupation/Job Title of Applicant					
)	Father's Full Name (First, Middle	Father's Full Name (First, Middle, Last)				
	Mother's Full Name (First, Middle, Maiden Name)					
<u>Marit</u>	al History (Please list in order l	by most recent)	Number of Prev	Number of Previous Marriages:		
Full Na	nme of Former Spouse					
Divorced Date of Divorce:			Deceased	Deceased Date of Death:		
County and State of Divorce			County and Sta	County and State of Death		
Case # of Divorce			Death Certificat	Death Certificate #		
Full Names of any minor children between you and former spouse						
Full Name of Former Spouse						
Di	vorced Date of Divorce:		[] Deceased	Date of Deat	h:	
County and State of Divorce			County and Sta	County and State of Death		
Case # of Divorce			Death Certificat	Death Certificate #		
Full Names of any minor children between you and former spouse						

~ Any additional previous marriage information must be supplied on a separate page ~

MARRIAGE LICENSE APPLICATION

Ashtabula County, Ohio

BRIDE / APPLICANT 2						
	First Name	Middle Name	Current Last Nam	Current Last Name		
	Social Security Number		Date of Birth	Age		
NT 2	Birth Place (City/State)					
LICA	Street Address			City		
APPI RMA	State		Zip Code	County		
BRIDE / APPLICANT	Street Address State Phone #		Email Address	nail Address		
BRII		Occupation/Job Title of Applicant				
	Father's Full Name (First, N	Father's Full Name (First, Middle, Last)				
Mother's Full Name (First, Middle, Maiden Name)						
Marit	Marital History (Please list in order by most recent) Number of Previous Marriages					
Full Na	ame of Former Spouse					
	ivorced Date of Divorce		[] Deceased Date of	[] Deceased Date of Death:		
Count	y and State of Divorce		County and State of Death			
Case a	# of Divorce		Death Certificate #			
Full Na	ames of any minor children b	between you and former spouse				
E. II NI	of Former Chause					
	ame of Former Spouse ivorced Date of Divorce		Deceased Date of	Dooth		
	y and State of Divorce	•	County and State of Death:			
	# of Divorce		Death Certificate #			
		between you and former spouse	Death Certificate #			
I un i .	anies of any minor sima.s	octwoon you and termior opeace				
~ Any additional previous marriage information must be supplied on a separate page ~						
Please provide the address where you would like to receive your certified marriage license copies:						
Street Address:						
City, State, Zip Code:						
#	of additional copies needed The marriage License fee (he marriage record. Any addition	nal copies are \$2.00 per additional copy.		

Application may be submitted in-person, by email, or fax. A Probate Clerk will call to set up your appointment. All required documentation must be provided at the date of the scheduled appointment.