

Applying for a Marriage License in Prospect

**YOU MUST CALL AND MAKE AN APPOINTMENT NO WALK-INS WILL
BE ACCEPTED 203-758-4461**

In order to apply in Prospect, you ***must be getting married in Prospect***. Each applicant ***must have a photo ID. Both parties must appear in person to sign the license***, under oath, in the presence of one of the office Registrars. ***The fee to obtain a Marriage License is \$50 (cash or check)***. Once issued, ***the license expires 65 days after the initial date of application***. Applicants do not have to appear at the same time, however, the 65-day period of license validity begins on the day that the first person applies. With the exception of holidays, ***applications are accepted Monday through Thursday, from 8:30 AM to 3:00 PM AND ON Friday 9:00 AM to 1:00 PM***. The complete process of application and transcription takes about 30 minutes.

As part of the application process, ***both parties must provide the following information:***

***Date of Marriage or Civil Union
Officiators Name and Phone Number
Social Security Numbers
Each Parents Place of Birth
Mother's Birth (Maiden) Name
Years of Education***

***Please complete the Marriage License Worksheet located on our website at : <https://townofprospect.org>
Select Department, Town Clerk, Documents & Forms,
Marriage License Worksheet. Email the completed worksheet to townclerk@townofprospect.org **BEFORE** your appointment.***

Following the marriage ceremony, the Officiator must sign the license and file it in Prospect, where the original document will remain as a permanent record of the event. ***Once filed, certified copies of the official record may be obtained in Prospect. If the applicant(s) reside in another Connecticut town, copies of the record will also be available from the resident town(s)***. By law, resident town copies are required to be transmitted by the 15th day of the month following the wedding. Prior to requesting a Connecticut *resident* copy, you should call the Town Clerk to verify that the transmitted copy has been received from the town where the wedding took place.

The statutory fee for each certified copy of a filed Marriage License is \$20.

State of Connecticut

01/22 This form may be produced by the local registrar's office

Department of Public Health

MARRIAGE LICENSE WORKSHEET

SPOUSE ONE

SPOUSE TWO

NAME (First) (Middle) (Last)			NAME (First) (Middle) (Last)		
SEX	DATE OF BIRTH (Mo., Day, Year)	AGE	SEX	DATE OF BIRTH (Mo., Day, Year)	AGE
BIRTHPLACE	EDUCATION (No. Yrs. Completed) GRADES 1-8 GRADES 9-12 COLLEGE (1-5+)		BIRTHPLACE	EDUCATION (No. Yrs. Completed) GRADES 1-8 GRADES 9-12 COLLEGE (1-5+)	
RESIDENCE (No. and Street)			RESIDENCE (No. and Street)		
CITY OR TOWN	COUNTY	STATE	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 NAME (LAST NAME PRIOR TO FIRST MARRIAGE)			FATHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)		
MOTHER/PARENT NAME (LAST NAME PRIOR TO FIRST MARRIAGE)			MOTHER/PARENT NAME (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)		MOTHER/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	IF PREVIOUSLY IN MARRIAGE OR CIVIL UNION, LAST RELATIONSHIP WAS 1. <input type="checkbox"/> MARRIAGE 2. <input type="checkbox"/> CIVIL UNION
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		
SOCIAL SECURITY # SPOUSE ONE			SOCIAL SECURITY # SPOUSE TWO		

OFFICIATOR INFORMATION

Phone: Officiator for Ceremony ()

OFFICIATOR'S NAME (FIRST) (LAST)

OFFICIATOR'S ADDRESS

()

TOWN WHERE MARRIAGE CEREMONY WILL BE PERFORMED:

DATE OF MARRIAGE: