

**TOWN OF BRANT  
REQUEST FOR CERTIFIED COPY OF MARRIAGE LICENSE FORM**

Phone: (716)549-0282  
 Fax (716) 549-0623  
 email: townclerk@brantny.com

**REMIT TO.....**  
 Town Clerk, Registrar  
 Town of Brant  
 1294 Brant-North Collins Road  
 PO Box 228  
 Brant New York 14081

**PLEASE COMPLETE FORM AND REMIT WITH FEE**  
 Fee \$10.00 for each certified copy requested

Please Print or Type							
Name of Groom	(First)	(Middle)	(Last)	Name of Bride	(First)	(Middle)	(Last)
Groom's Date of Birth				Bride's Date of Birth			
Groom's Residence	(County)	(State)		Bride's Residence	(County)	(State)	
Date of Marriage or Period Covered by Search				Bride's Maiden Name			
Place Where License Was Issued				City Where Wedding Was Performed			
For What Purpose is information required?				What is your relationship to person whose record is requested? If self, state "Self"			
In capacity are you acting?				If attorney: Name & Relationship of your client to persons whose marriage record is required			
Signature of Applicant				Date			
Address of Applicant				Please print name & Address where record to be sent:			