

**MARRIAGE LICENSE APPLICATION QUESTIONNAIRE  
TOWN OF BRANT, NEW YORK**

**District: Brant  
Year: 20\_\_**

**IMPORTANT INFORMATION ABOUT NAMES USED ON THIS APPLICATION:  
(According to NYS)**

- *Every Person has the right to adopt any name by which he or she wishes to be known simply by using that name consistently and without intent to defraud.*
- *A person's last name (surname) does not automatically change upon marriage, and neither party to the marriage must change his or her last name. Parties to a marriage need not have the same last name.*
- *One of both parties may elect to change the surname by which he or she is to be known after the solemnization of the marriage by entering the new name in the appropriate space provided in the Affidavit Section of this application. Such entry shall consist of one of the following surnames:*
  - *The surname of the other spouse, or*
  - *Any former surname of either spouse, or*
  - *A name combining into a single surname all or a segment of the pre-marriage surname or any former surname of each spouse, or*
  - *A combination name separated by a hyphen, provided that each part of such combination surname is a premarriage surname, of each person.*
- *The use of this option will have an effect of providing a record of the change of name. The marriage certificate, containing the new name, if any, constitutes proof that the use of the new name, or retention of the former name, is lawful.*

*Neither the use of, nor failure to use, this option of selecting a new surname by means of this application abrogates the right of each person to adopt a different name through usage at some future date.*

**GROOM INFORMATION:**

1) Groom Info: FULL NAME & ADDRESS **PRIOR** to Marriage  
(***CURRENT LEGAL NAME ON YOUR DRIVERS LICENSE***)

Title (Circle one) Dr, Mr.

1A. First Name: \_\_\_\_\_

1A Middle Name: \_\_\_\_\_

1C. Last Name: \_\_\_\_\_ (*Current Surname*)

1B. BIRTHNAME IF DIFFERENT \_\_\_\_\_

1C. Suffix: (Circle one) I, II, III, IV, JR, SR (*If applicable*)

1D. SOC. SEC. # \_\_\_\_\_

2) STREET ADDRESS: \_\_\_\_\_

PO BOX (If applicable) \_\_\_\_\_

CITY/VILLAGE/TOWN: \_\_\_\_\_ (*Circle City, Town or Village*)

STATE, ZIP CODE \_\_\_\_\_

3) AGE: \_\_\_\_\_ 3B. DATE OF BIRTH \_\_\_\_\_

4) EMPLOYMENT:

A. USUAL OCCUPATION \_\_\_\_\_

B. TYPE OF INDUSTRY/BUSINESS \_\_\_\_\_

5) PLACE OF BIRTH \_\_\_\_\_

City, State/Country, If not USA

6) FATHER:

A. FULL NAME \_\_\_\_\_

B. COUNTRY OF BIRTH \_\_\_\_\_

**GROOM'S INFO PRIOR TO MARRIAGE (CONT'D)**

7) MOTHER:

- A. FULL (MAIDEN) NAME: \_\_\_\_\_
- B. COUNTRY OF BIRTH \_\_\_\_\_

8) NUMBER OF MARRIAGES: \_\_\_\_\_

9) PREVIOUS MARRIAGES

- A. NUMBER OF MARRIAGES ENDED BY:  
DIVORCE \_\_\_\_\_ CIVIL ANULMENT \_\_\_\_\_ DEATH \_\_\_\_\_
- B. HOW DID LAST MARRIAGE END? (*circle one*) Divorce / Annulment / Death
- C. DATE LAST MARRIAGE ENDED? \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- D. IS ANY FORMER SPOUSE(S) ALIVE? (*Circle one*) YES / NO

**GROOM INFO AFTER** Marriage: (*SEE NYS NAME INFO ABOVE IN ITALICS*)

- Title: (*Circle One*) Dr, Mr.
- First Name: \_\_\_\_\_
- Middle Name: \_\_\_\_\_
- Last Name: \_\_\_\_\_ (*Surname AFTER marriage*)
- Suffix: (*Circle one*) I, II, III, IV, JR, SR (*If applicable*)

**ADDRESS: (WHERE YOU WILL GET MAIL AFTER THE MARRIAGE):**

- STREET ADDRESS: \_\_\_\_\_
- PO BOX (*If applicable*) \_\_\_\_\_
- CITY/VILLAGE/TOWN: \_\_\_\_\_ (*Circle City, Town or Village*)
- STATE, ZIP CODE \_\_\_\_\_

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**BRIDE INFORMATION:**

1) BRIDE Info: FULL NAME & ADDRESS **PRIOR** to Marriage  
(CURRENT LEGAL NAME ON YOUR DRIVERS LICENSE)

Title (*Circle one*) Dr., Miss, Mrs, Ms.

- 1A. First Name: \_\_\_\_\_
- 1A Middle Name: \_\_\_\_\_
- 1C. Last Name: \_\_\_\_\_ (*Current Surname*)
- 1B. BIRTHNAME IF DIFFERENT \_\_\_\_\_
- 1C. Suffix: (*Circle one*) I, II, III, IV, JR, SR (*If applicable*)
- 1D. SOC. SEC. # \_\_\_\_\_

**BRIDE'S INFO PRIOR TO MARRIAGE (CON'T)**

2) STREET ADDRESS: \_\_\_\_\_  
PO BOX (if applicable) \_\_\_\_\_  
CITY/VILLAGE/TOWN: \_\_\_\_\_ (Circle City, Town or Village)  
STATE, ZIP CODE \_\_\_\_\_

3) AGE: \_\_\_\_\_ 3B. DATE OF BIRTH \_\_\_\_\_

4) EMPLOYMENT:

A. USUAL OCCUPATION \_\_\_\_\_  
B. TYPE OF INDUSTRY/BUSINESS \_\_\_\_\_

5) PLACE OF BIRTH \_\_\_\_\_  
City, State/Country, If not USA

6) FATHER:

A. NAME \_\_\_\_\_  
B. COUNTRY OF BIRTH \_\_\_\_\_

7) MOTHER:

A. FULL (MAIDEN) NAME: \_\_\_\_\_  
B. COUNTRY OF BIRTH \_\_\_\_\_

8) NUMBER OF MARRIAGES: \_\_\_\_\_

9) PREVIOUS MARRIAGES

A. NUMBER OF MARRIAGES ENDED BY:  
DIVORCE \_\_\_\_\_ CIVIL ANULMENT \_\_\_\_\_ DEATH \_\_\_\_\_

B. HOW DID LAST MARRIAGE END? (circle one) Divorce / Annulment / Death

C. DATE LAST MARRIAGE ENDED? \_\_\_\_/\_\_\_\_/\_\_\_\_

D. IS ANY FORMER SPOUSE(S) ALIVE? (Circle one) YES / NO

**BRIDE INFO AFTER MARRIAGE:** (SEE NYS NAME INFO ABOVE IN ITALICS)

Title: (Circle One) Dr., Miss, Mrs, Ms  
First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ (surname after marriage)  
Suffix: (Circle one) I, II, III, IV, JR, SR (If applicable)

**ADDRESS:** (WHERE YOU WILL GET MAIL AFTER THE MARRIAGE):

STREET ADDRESS: \_\_\_\_\_  
PO BOX (if applicable) \_\_\_\_\_  
CITY/VILLAGE/TOWN: \_\_\_\_\_ (Circle City, Town or Village)  
STATE, ZIP CODE \_\_\_\_\_

**FEE: \$35.00**

**PAYABLE TO: TOWN OF BRANT**

**I.D. REQUIRED – DRIVER'S LICENSE & CERTIFIED COPY OF BIRTH  
CERTIFICATE & PROOF OF PAST DIVORCES/ANULMENTS**