

WASHINGTON COUNTY CLERK
111 EAST TABERNACLE STREET
ST. GEORGE, UT 84770
PHONE: (435) 301-7220

CERTIFIED COPY OF MARRIAGE LICENSE REQUEST



MARRIAGE LICENSE IDENTIFYING INFORMATION

APPLICANT 1 FULL NAME (at time of application): _____

APPLICANT 2 FULL NAME (at time of application): _____

DATE OF MARRIAGE: _____ MARRIAGE LICENSE # _____

REQUESTOR IDENTIFYING INFORMATION

RELATIONSHIP: SELF PARENT SIBLING SPOUSE CHILD GRANDPARENT GRANDCHILD

OTHER (specify) _____

PRINTED NAME _____

PHONE # _____ EMAIL ADDRESS _____

PHYSICAL ADDRESS _____
Street Address City State Zip Code

MAILING ADDRESS (if different) _____
Street Address City State Zip Code

NUMBER OF CERTIFIED COPIES REQUESTED

1 Certified Copy (\$10.00) \$ 10.00

_____ Additional Certified Copies (\$5.00 each) \$ _____

Total Fee \$ _____

**YOU MUST PROVIDE A COPY OF YOUR
PICTURE ID WITH THIS REQUEST**

PAYMENT MUST ALSO BE RECEIVED

**MAKE CHECKS PAYABLE TO
WASHINGTON COUNTY CLERK**

I declare under criminal penalty under the laws of the State of Utah that the foregoing is true and correct, and that I am a person represented herein and authorized to request this vital record.

Signed this _____ day of _____, 20____ Signature _____

A PERSON WHO KNOWINGLY MAKES A FALSE WRITTEN STATEMENT ON THIS FORM IS GUILTY OF A CLASS B MISDEMEANOR.

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Office Use Only

ID # _____

ID EXP DATE _____

PAID _____

MAILED _____

CLERK INITIALS _____