

CITY OF PORTSMOUTH, NEW HAMPSHIRE MARRIAGE CERTIFICATE APPLICATION

INSTRUCTIONS:

1. Print the application to complete.
2. Please make sure all information is complete, legible, and sign the application.
3. **Enclose a photocopy of picture identification of the person requesting the record** (driver's license, passport or other picture identification) in the absence of acceptable picture identification you must complete the form "Documentation Evidence for Individuals not possessing an Acceptable Picture Identification."
4. Enclose a check or money order made payable to the City of Portsmouth for \$***15.00** for the first copy and \$**10.00** each additional copy.
5. Include a self-addressed stamped envelope for the return of the certificate.
6. Mail your request to: OFFICE OF THE CITY CLERK, 1 Junkins Avenue, Portsmouth, NH 03801
7. **Requests without positive identification will be returned without having been processed.**

PLEASE TYPE OR PRINT

Prior Full Name of Groom/Person A: _____

Prior Full Name of Bride/Person B: _____

Date of Marriage (Month, Day, Year): _____

Place of Marriage (City or Town): _____
(Please Note: As of April 2017, Marriage Records for the entire State of New Hampshire can now be issued by any City/Town Clerk in New Hampshire from 1960 to the present)

Purpose for which the certificate is requested: _____
(Example: records, genealogy, insurance, name change, legal)

Name and Address to send certificates: _____

Telephone/Email Address (in case we need to contact you): _____

Your Signature: _____ (all unsigned requests will be rejected)

Relationship to Registrant: _____ (see below)

The following stipulations apply your relationship to the individual:

- ◆ Records 50 years and older are public record and familial relationship is not required.
- ◆ Records for events occurring within 50 years of date requested must have a familial relationship of mother, father, brother, sister, uncle, aunt, niece, nephew, grandparent, and step parents.

**A fee of \$15.00 is required by law for the search of the file for any one record.*

NOTICE: Any person shall be guilty of a Class B Felony if he/she willfully and knowingly make any false statement in an application for a certified copy of a vital record as per RSA 126:24.

If you should have any specific questions regarding this application, please contact the Office of the City Clerk at the telephone number listed or via e-mail. (Rev. 05/2017)

Thank you for visiting www.cityofportsmouth.com