

New Bremen Town Clerk  
8420 State Rte. 812, Lowville NY 13367  
(315) 376-2641 email: nbtownclerk@gmail.com

**APPLICATION FOR ONE-DAY MARRIAGE OFFICIANT LICENSE**

- A One-Day Marriage Officiant must be 18 years of age or older and need not be a resident of the town or city to which they apply or a resident of New York State. A One-Day Marriage Officiant shall have the authority to solemnize a marriage anywhere in New York State.
- An applicant for a One-Day Marriage Officiant License must apply for such license in the same town clerk's office as the couple to be married.
- **Application Fee** - \$25.00 in cash, check or money order made payable to: New Bremen Town Clerk (credit/debit cards **NOT** accepted)
- A One-Day Marriage Officiant License shall only be valid for the parties to be married as stated on the application and shall expire after the marriage ceremony or the expiration of the marriage license, whichever occurs first.
- One-Day Marriage Officiants shall be exempt from registration as required pursuant to Section 11-b of the Domestic Relations Law.

**APPLICANT**

<b>Surname</b>		<b>First Name</b>		<b>Middle Name</b>	
<b>Place of Residence</b>	House & Street Address			Apt No	Zip Code
	City	State	Country	Date of Birth: Month	Day Year
Email Address:				Phone Number:	

**INFORMATION OF PARTIES TO BE MARRIED**

<b>BRIDE/GROOM/SPOUSE</b>	<b>Surname</b>		<b>First Name</b>		<b>Middle Name</b>	
<b>Place of Residence</b>	House & Street Address			Apt No	Zip Code	
	City	State	Country	Date of Birth: Month	Day	Year
<b>BRIDE/GROOM/SPOUSE</b>	<b>Surname</b>		<b>First Name</b>		<b>Middle Name</b>	
<b>Place of Residence</b>	House & Street Address			Apt No	Zip Code	
	City	State	Country	Date of Birth: Month	Day	Year
<b>Marriage License Number (REQUIRED)</b>		<b>Expiration Date of Marriage License:</b> Month Day Year				

I solemnly swear, under penalty of perjury, that the foregoing information is true and correct and is herein stated to induce the Town Clerk to issue a One-Day Marriage Officiant License in my name pursuant to Section 11-d of the Domestic Relations Law.

X \_\_\_\_\_  
Applicant Signature (must be signed in the presence of Clerk or if mailed, by a Notary Public) Date

<p>SWORN TO BEFORE ME THIS ____ DAY OF _____, 20____.</p> <p>_____ Town Clerk or Notary Public Signature</p> <p>(Town Seal or Notary Stamp required)</p>	<p><b>FOR CLERK'S USE ONLY (Check One):</b></p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Driver's License</td> <td><input type="checkbox"/> Perm. Resident Card</td> </tr> <tr> <td><input type="checkbox"/> U.S. Military ID</td> <td><input type="checkbox"/> ID NYS</td> </tr> <tr> <td><input type="checkbox"/> Non-Driver's ID</td> <td><input type="checkbox"/> Certificate of Naturalization</td> </tr> <tr> <td><input type="checkbox"/> Passport</td> <td><input type="checkbox"/> Other: _____</td> </tr> </table> <p><b>Document Number</b> _____ <b>Exp Date</b> _____</p>	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Perm. Resident Card	<input type="checkbox"/> U.S. Military ID	<input type="checkbox"/> ID NYS	<input type="checkbox"/> Non-Driver's ID	<input type="checkbox"/> Certificate of Naturalization	<input type="checkbox"/> Passport	<input type="checkbox"/> Other: _____
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