



**Clerk of the Circuit Court**

**Brevard County, Florida**

400 South Street, P.O. Box 219, Titusville, Florida 32781-0219

<http://www.brevardclerk.us>

**Scott Ellis, Clerk**

## **REQUEST FOR MARRIAGE LICENSE INFORMATION**

You have requested to apply for a Marriage License by mail. Mailed applications are processed on a first come, first serve basis AFTER those processed in person at our physical office locations and mailing time is NOT guaranteed. So that we may process your request, please complete the enclosed information sheet and return it to us. You may mail it to the address below **or fax** it to (321) 264-6949 or via the e-mail address below. Once we receive the information, we will prepare the APPLICATION TO MARRY and return it to you along with instructions from that point on.

Basically, you **WILL NOT SIGN** the Application to Marry (which you will receive from us on a later date) until you appear before a Notary Public. **The Application to Marry IS NOT a valid Marriage License – a ceremony CANNOT be performed at this time.**

Once you have signed the Application to Marry along with an Affidavit regarding FS 741.212, (both of which you will receive from us later), before a Notary Public, you will then return the Application to Marry and Affidavit regarding FS 741.212 to this office along with the application fee and a copy of a valid picture ID for each applicant. Upon receipt, we will then execute the LICENSE TO MARRY and return the license to you.

Once executed, the Marriage License is valid for 60 days. A ceremony must be performed before the expiration of the 60 day period. If the 60 days expire, you will not receive a refund and you will have to start the application process again – including payment of a new application fee.

If you have any questions, please contact the Marriage License Information Clerk at (321)637-5413 or via email at [marriagelicenseinformation@brevardclerk.us](mailto:marriagelicenseinformation@brevardclerk.us).

Application fee information is listed with Fees & Charges, under the Quick Links section of our home page at [www.brevardclerk.us](http://www.brevardclerk.us).

You must submit your Certificate of Attendance from the counseling provider with your application. *Payment must be remitted to the Clerk of the Court and will be paid when the executed Application to Marry has been issued to the couple.*

### **DO NOT SEND PAYMENT AT THIS TIME!**

#### **MAILING ADDRESS**

Scott Ellis, Clerk of Court  
Attn: Marriage License Information  
P O Box 219  
Titusville, FL 32781-0219

#### **PHYSICAL ADDRESS**

Scott Ellis, Clerk of Court  
Attn: Marriage License Information  
400 South Street, 2<sup>nd</sup> Floor  
Titusville, FL 32780

# Marriage License Information by Mail

(This information will be used to generate the actual marriage license application at a later date)

GROOM'S FULL LEGAL NAME \_\_\_\_\_  
( first ) ( middle ) ( last ) ( Jr./Sr. etc )

RACE: American Indian Black Hispanic Indian Oriental/Asian Pacific Islander White Unknown  
( Circle One )

CITY, COUNTY, STATE: \_\_\_\_\_  
(Where you currently live)

STATE OF BIRTH : \_\_\_\_\_ DATE OF BIRTH : \_\_\_\_\_

NUMBER OF THIS MARRIAGE: \_\_\_\_\_ LAST MARRIAGE ENDED: ( DIVORCE / DEATH / ANNULMENT )  
( i.e. 1<sup>st</sup>, 2<sup>nd</sup>, etc. ) ( Circle one )

DATE LAST MARRIAGE ENDED: \_\_\_\_\_  
( month / day / year )

GROOM'S SOCIAL SECURITY NUMBER: \_\_\_\_\_  
(Non- U.S. residents need to submit passport numbers & country name in place of U.S. Social Security numbers)

BRIDE'S FULL LEGAL NAME: \_\_\_\_\_  
(At this time) (first) (middle) (last)

BRIDE'S FULL LEGAL NAME:  
( At birth ) \_\_\_\_\_  
(first) (birth middle) ( last / maiden )

RACE: American Indian Black Hispanic Indian Oriental/Asian Pacific Islander White Unknown  
( Circle one )

CITY,COUNTY,STATE: \_\_\_\_\_  
(Where you currently live)

STATE OF BIRTH: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

NUMBER OF THIS MARRIAGE: \_\_\_\_\_ LAST MARRIAGE ENDED: ( DIVORCE / DEATH / ANNULMENT )  
( i.e 1<sup>st</sup>, 2<sup>nd</sup> etc. ) ( Circle one )

DATE LAST MARRIAGE ENDED: \_\_\_\_\_  
( month / day / year )

BRIDE'S SOCIAL SECURITY NUMBER: \_\_\_\_\_  
( Non-US resiedents need to submit passport numbers& county name in place of U.S. Social Security numbers)

MAILING ADDRESS FOR APPLICATION: \_\_\_\_\_ PHONE NUMBER : \_\_\_\_\_  
\_\_\_\_\_ WORK NUMBER: \_\_\_\_\_  
\_\_\_\_\_ E-MAIL: \_\_\_\_\_  
\_\_\_\_\_ EXPECTED WEDDING DATE: \_\_\_\_\_

MAILING ADDRESS AFTER CEREMONY:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE DO NOT NOTARIZE THIS FORM!**