Marriage Certificate

Full Maiden Name of Bride/Spouse:		
Full Name	of Groom/Spouse:	
Date of Ma	rriage:	
Place of Marriage:		
Applicant N	lame:	
Applicant A	ddress:	
Indicate yo	ur Relationship to the person on	
requested r	record below:	
	Self/Spouse	
	Parent	
	Guardian	
	Descendant	
	Attorney of person on record	
	Genealogist ID #	
By signing	below, I swear/affirm that the	
information	above is true and correct.	
Applicant S	ignature:	
Today's Da	ite:	
\$15 for 1 ^s	t copy, \$6 for each additional copy	

Proof of identity of applicant:

Appli	can	t must provide one of these:
ſ	J	Driver's License
(J	Passport
ſ	J	Government issued picture I.D.
OR two of these:		
ſ	J	Utility bills
ſ	J	Bank statements
ſ	J	Vehicle registration
ſ	J	Income tax return
ſ	J	Personal Check w/ address
ſ	J	A previously issued vital record
ſ	J	Letter from government agency requesting
		record (DHHS, WIC)
ſ	J	Department of Corrections I.D. card
ſ	J	Social Security Card
ſ	J	DD 214
ſ	J	Hospital; birth worksheet
ſ	J	License/rental agreement
ſ	J	Pay stub
ſ	J	W-2
ſ	J	Voter Registration card
ſ	J	Disability award from SSA
ſ	J	Other
Establishing eligibility to acquire record:		
ſ	J	Related applicants must provide proof of
		lineage.
ſ	J	Domestic Partners must provide proof of
		registration of domestic partnership
ſ	J	Attorneys must provide a signed, notarized
		release from family
ſ	J	Genealogists must provide a state-issued
		card
ſ	J	Do not retain copies of proof provided or
		note any specific numbers

Proof of identity and Payment must be included with all requests.

We do not retain copies of proof of identity provided or note any specific numbers after request is completed.

Payment:

\$15 for the first copy of each individual record, \$6 for each additional copy of same record requested the same day.

Town of Hiram 16 Nasons Way Hiram ME 04041 207-625-4663

Hours
Mon – Weds 9am to 3pm
Thurs 9 am to 7pm
Closed on Fridays