

**STATE OF IOWA**  
IOWA DEPARTMENT OF PUBLIC HEALTH  
*Bureau of Vital Records*

County	_____
License No.	_____
Date of Application	_____
Valid Date of License	_____

**APPLICATION FOR MARRIAGE LICENSE IN IOWA**

Type or print legibly in black ink. Do not use all capital letters.

**PART 1. GROOM'S INFORMATION**

NAME BEFORE MARRIAGE \_\_\_\_\_  
(First) (Middle) (Last)

NAME AFTER MARRIAGE \_\_\_\_\_  
(First) (Middle) (Last)

CURRENT RESIDENCE ADDRESS AT TIME OF APPLICATION  
\_\_\_\_\_  
(State) (County) (City, Town or Location) (Street Address)

DATE OF BIRTH \_\_\_\_\_ BIRTH PLACE \_\_\_\_\_  
(Month, Day, Year) (State or Foreign Country of Birth)

PARENTS \_\_\_\_\_  
(Father's Full Name) (Mother's Full Maiden Name – as appears on her birth certificate)

**PART 2. BRIDE'S INFORMATION**

NAME BEFORE MARRIAGE \_\_\_\_\_  
(First) (Middle) (Last) (Maiden Name – as appears on birth certificate)

NAME AFTER MARRIAGE \_\_\_\_\_  
(First) (Middle) (Last)

CURRENT RESIDENCE ADDRESS AT TIME OF APPLICATION  
\_\_\_\_\_  
(State) (County) (City, Town or Location) (Street Address)

DATE OF BIRTH \_\_\_\_\_ BIRTH PLACE \_\_\_\_\_  
(Month, Day, Year) (State or Foreign Country of Birth)

PARENTS \_\_\_\_\_  
(Father's Full Name) (Mother's Full Maiden Name – as appears on her birth certificate)

**PART 3. SIGNATURE NOTARIZATIONS**

\_\_\_\_\_  
GROOM'S SIGNATURE (current legal name)

\_\_\_\_\_  
BRIDE'S SIGNATURE (current legal name)

State of \_\_\_\_\_, County of \_\_\_\_\_ ss

State of \_\_\_\_\_, County of \_\_\_\_\_ ss

Subscribed and sworn to before me in my presence by

Subscribed and sworn to before me in my presence by

\_\_\_\_\_ on this \_\_\_\_\_

\_\_\_\_\_ on this \_\_\_\_\_

day of \_\_\_\_\_, \_\_\_\_\_.

day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public or Officer Authorized to Take Acknowledgments

\_\_\_\_\_  
Notary Public or Officer Authorized to Take Acknowledgments

Commission Expires \_\_\_\_\_ or Seal

Commission Expires \_\_\_\_\_ or Seal

\* \* \* **CONFIDENTIAL INFORMATION REQUIRED BY LAW - FOR STATISTICAL PURPOSES ONLY – NOT FOR PUBLIC VIEWING** \* \* \*

GROOM'S SOCIAL SECURITY NUMBER \_\_\_\_\_

BRIDE'S SOCIAL SECURITY NUMBER \_\_\_\_\_

**AFFIDAVIT OF COMPETENT AND DISINTERESTED PERSON  
as to age and qualification of the contracting parties**

The State of \_\_\_\_\_ , \_\_\_\_\_ County, ss.

I, \_\_\_\_\_ do solemnly swear that I am acquainted with \_\_\_\_\_ , and that he is \_\_\_\_\_ years of age; and that I am acquainted with \_\_\_\_\_ , and that she is \_\_\_\_\_ years of age. I swear that I am a lawfully competent and disinterested person and impartial to the result of this pending transaction. I further depose and say that they are both unmarried and capable of entering into any civil contract, that there is no legal disability to the marriage of said parties, and that their marriage is to be solemnized in the State of Iowa.

\_\_\_\_\_  
(Print Name Legibly) (Street Address)  
\_\_\_\_\_  
(Signature) (City, State, Zip Code)

**NOTARY PUBLIC SIGNATURE TO AFFIDAVIT OF DISINTERESTED PERSON**

The State of \_\_\_\_\_ , \_\_\_\_\_ County, ss.

Subscribed and sworn to before me in my presence by \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_.

Commission Expires \_\_\_\_\_ or Seal. \_\_\_\_\_  
Notary Public or Officer Authorized to Take Acknowledgments

**Notary Public cannot serve as disinterested person.**

**NOTICE TO APPLICANTS: PLEASE READ CAREFULLY!**

- Applicants age 16 or 17 years old must also present a completed Consent to Marriage form for approval to a judge of the district court in the county from which the marriage license is to be obtained.
- **Per the Code of Iowa, Section 595.3A: The laws of this state affirm your right to enter into this marriage and at the same time to live within the marriage under the full protection of the laws of this state with regard to violence and abuse. Neither of you is the property of the other. Assault, sexual abuse, and willful injury of a spouse or other family member are violations of the laws of this state and are punishable by the state.**
- *\$35.00 fee must accompany this application (fee change effective January 1, 2001).*
- *Return application and fee to the County Registrar of Vital Records in the county where you wish your record filed.*
- *Review Marriage License Instructions handout for more details, including about the certified copy of your marriage record that you will automatically receive after the record has been filed and registered.*

**Please complete below if you wish the County Registrar to follow-up if your marriage record has not been filed within one year of your anticipated date.**

Anticipated Ceremony Date \_\_\_\_\_ Anticipated Officiant \_\_\_\_\_