



CROMWELL TOWN CLERK
41 WEST STREET
CROMWELL, CT 06416
860-632-3440

REQUEST FOR CERTIFIED COPY OF MARRIAGE CERTIFICATE

Spouse #1	Full Legal Name Before Marriage
	First Middle Last
Spouse #2	Full Legal Name Before Marriage
	First Middle Last
Date of Marriage (Month/Day/Year)	
Town of Marriage	

PLEASE NOTE: In accordance with C.G.S. §7-51A, only the bride, groom or spouse listed on the marriage certificate or other persons authorized by the Department of Public Health, shall be issued a certified copy of a marriage certificate containing the Social Security numbers of the bride, groom or spouse. All other requesters will receive a copy of the marriage certificate without the social security numbers.

PERSON MAKING THIS REQUEST:

Name: _____
First Middle Last

Address: _____
Number Street

Town/City: _____ State: _____ Zip Code: _____

Telephone No.: _____ Email Address: (optional) _____

Relation to Person Named in Certificate: _____

Signature: _____

The fee for a copy of Marriage Certificate is \$20.00 per copy

Number of Copies Requested: _____ Amount Enclosed: \$ _____

FEE: \$20.00 PER COPY: Make check payable to Cromwell Town Clerk

* PLEASE INCLUDE A COPY OF YOUR DRIVER'S LICENSE*

Mail Request to: Cromwell Town Clerk
41 West Street
Cromwell, CT 06416