

**Marriage License
Certified Copy Request Form**

Please fill out the information below. When complete, please print, sign, and mail to the address listed.

Groom/Spouse Name: _____

Bride/Spouse Full Maiden Name: _____

Date of Marriage: _____ Place of Marriage: _____

Applicant's Name: _____

Date of Request: _____ Phone: _____

Applicant's Signature: _____

Fee: \$20.00 per copy Number of Copies Requested: _____

Make check payable to Town Clerk.

Mail To: **Town Clerk**
 One Central Square
 Plainville, CT 06062

Please include a stamped, self addressed envelope.