Scott Ellis



CLERK OF THE CIRCUIT AND COUNTY COURTS, BREVARD COUNTY, FLORIDA

700 S. Park Avenue, Bldg B, Titusville, FL 32780 P.O. Box 2767, Titusville, FL 32781-2767

Telephone: 321-637-2006 Recording Fax: 321-264-5246

http://www.brevardclerk.us

REQUEST FOR MARRIAGE LICENSE INFORMATION

You have requested to apply for a marriage license by mail or email. This office strives to meet all of our customers' needs in a timely manner. *Postal mailing times cannot be guaranteed by this office*. Please allow sufficient time for processing. Florida residents **must** visit their local Clerk's Office to apply for a marriage license. *(Due to COVID-19, this requirement is being temporarily suspended)*.

The following document included in your request is:

• Marriage License Information

You must fill out the document completely along with reviewing the <u>Family Law Handbook</u>, as pursuant to Section 741.04 (2)(b), Florida Statutes.

Upon receipt of the form, which you will submit by mail, fax or email, we will send to you all applicable documents needed for our office to complete your request, either by email or standard mail. You will receive these documents no earlier than sixty (60) days from your expected wedding date.

Mailing Address: Clerk of Circuit Court

Attn: Marriage License P.O. Box 2767 Titusville, FL 32781

• Fax: (321)264-5246

• Email: mailawaymarriagelicenses@brevardclerk.us

If you have any further questions, please contact our office via the email address provided above or by phone, (321) 637-2006.

Mailing Address:

Scott Ellis, Clerk of Circuit Court Attn: Marriage License P. O. Box 2767 Titusville, FL 32781-2767

Physical Address:

Scott Ellis, Clerk of Circuit Court Attn: Marriage License 700 S. Park Ave., Bldg. B Titusville, FL 32780



Marriage License Information Sheet

Please Print Legibly

Spouse's Information							
Full Legal Name (First, Middle, Last)							
Date of Birth	Birthplace		ail Address	Daytime Phone Number			
(MM/DD/YYYY)	(State or Foreign Count				(including Area Code)		
					()		
0					\ /		
Current Address							
City		County	unty State		9	Zip Code	
						_	
On sint On south a North and the state of th							
Social Security Number (Non-U.S. citizens provide passport number/country) Race (White, African American, Hispanic, Asian, Native American, Indian, Pacific Islander, Other)							
mulari, i adilic islander, Other)							
Number of Last Marriage Ended In				Date Last Marriage Ended			
This Marriage					(MM/DD/YYYY)		
i i i i i i i i i i i i i i i i i i i	Death	Divorce	Annulment				
Spouse's Information							
Full Legal Name (First, Middle, Last)					Maiden Surname (if different)		
Date of Birth	Birthplace		Email Address		Daytime Phone Number		
(MM/DD/YYYY)	(State or Foreign Count	ry)			(including Area Code)		
					()		
Current Address							
Outlett Address							
City		County	ounty		9	Zip Code	
Social Security Number (Non-U.S. citizens provide Race (White, African American, Hispanic, Asian, Native American,							
passport number/country) Indian, Pacific Islander, Other)							
Number of	Last Marriage E	nded In	L	Date	Last Marr	iage Ended	
This Marriage		(MM/DD/YYYY)					
	☐ Death ☐	¹ Divorce	Annulment				
Do the applicants have minor children TOGETHER and BORN in the State of Florida?							
☐ Yes ☐ No							
Expected Wedding Date Mail Back Address After Ceremony (if different than above)							
Expected Wedding Date Wall Dack Address After Ceremony (If different than above)							
L							