## Getting Married?



## The following information compiled by the Titus County Clerk's Office can help...

- Marriage license may be issued at the County Clerk's office at 100 West First Street, Suite 204, Mount Pleasant, Texas 75455
- You may obtain a marriage license anytime Monday-Friday (except holidays) from 8:00 am-4:45 pm. Please arrive at least 30 minutes before closing.
- It takes approximately 15-20 minutes to complete the application and issuance process. Please plan accordingly.
- You both must apply in person in the County Clerk's. Office and fill out an application.
- You both must be over 18 years of age
- You both must have a valid state-issued photo ID (driver's license or passport)
- You both must know your social security number, address, city and county of birth
- There is a 72 hour waiting period before you can get married (unless you a member of the armed forces of the United States and on active duty, the District Judge waives the waiting period, or unless you complete a Texas Education Course)
- The license expires in 90 days
- If divorced, it must be for over 30 days
- The fee is \$82.00- CASH or CREDIT CARD ONLY. If you have completed a Texas Education Course, and have the certificate of completion, the fee is \$22.00- CASH OR CREDIT CARD ONLY.
- You may use the Titus County issued marriage license anywhere in Texas. If you wish to get married out of the state, the state in which you get married MAY NOT recognize a Texas issued license. It is your responsibility to check with that state or country.

If you have more questions or concerns, please contact the Clerk's Office at (903) 577-6796



Middle Name

APPLICATION FOR MARRIAGE LICENSE,

The form and content of this application is prescribed by section 2,004 of the Texas Family Code.

WARNING: IT IN A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR FOR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO \$10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195,003)

Applicant One	First Name		Middle Name			Current Last Name			Suffix
	Woman's Maiden Name (If Applicable)					Telephone Number			
	Street Address City					State	Zip		
	Date of Birth	Place of Birth (including city, county and state			e)	Social Security Number	Number		
Thursday Andrew Control of the Contr									
I have not been divorced within the last 30 days.   TRUE   FALSE    I am not presently married.   TRUE   FALSE    I am not presently married.   TRUE   FALSE    an ancestor or descendant, by blood or adoption;  a brother or sister of the whole or half blood or by adoption;									
a parent's brother or sister, of the whole or half blood or by									
I am not presently delinquent in the payment of court ordered child support.  TRUE   FALSE   adoption; a son or daughter of a brother or sister, of the whole or half blood or									
by adoption;  The other applicant is not presently married  TRUE FALSE    * a current or former stepchild or stepparent; or									
a son or daughter of a parent's brother or sister, of the whole or half blood or by adoption;									
☐ I wish to make a voluntary contribution of \$5.00 to promote healthy early childhood by supporting the Texas Home Visitation Program administered by the Office of Early									
Childhood Coordination of Health and Human Services [Texas Family Code 2.004(13)].									
I solemnly swear (or affirm) that the information I have given in this application is correct									
	First Name		Applicant's Signature and Date Signed  Current Last Name Suffix						
	First Name . Middle Name				Current Last tynnie .				
Applicant Two	Woman's Maiden Name (If Applicable)					Telephone Number			
	Street Address		<del></del>		City	_ :	State	Zip	
	Date of Birth	Place of Birth (including city, county and st			<u> </u>	Social Security Number			
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I have not been divorced within the last 30 days.   TRUE  FALSE  I am not related to the other applicant as:   TRUE  FALSE									
I am not presently married.   TRUE FALSE  an ancestor or descendant, by blood or adoption; a brother or sister, of the whole or half blood or by adoption;									
• a parent's brother or sister, of the whole or half blood or by adoption;									
□ TRUE □ FALSE  • a son or daughter of a brother or sister, of the whole or half blood or by adoption;									
The other applicant is not presently married TRUE FALSE  a current or former stepchild or stepparent; or a son or daughter of a parent's brother or sister, of the whole or half blood or by adoption;									
☐ I wish to make a voluntary contribution of \$5.00 to promote healthy early childhood by supporting the Texas Home Visitation Program administered by the Office of Early									
Childhood Coordination of Health and Human Services [Texas Family Code 2.004(13)].									
I solemnly swear (or affirm) that the information I have given in this application is correct  Applicant's Signature and Date Signed									
Mail Executed License To (Street/P.O. Box, City, State, Zip)									
For County Clerk Office Use Only									
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County Texas: Ceremony Performed By									
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Applicant One Identification Type((ID, & Age)) Applicant One Identificat									
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