

Town Clerk's Office 15 Sunapee Street Newport NH 03773 PH: 603-863-2224

Email: clerk@newportnh.gov

OFFICIAL USE ONLY

Document #s:
Date Issued:
Total Amount Due: \$

APPLICATION FOR CERTIFIED COPY OF MARRIAGE CERTIFICATE

*PHOTO ID IS REQUIRED

Groom's/Person A's Name:				
Bride's/Person B's Name At Tir				
Intentions Were Filed :				
Date of Marriage:		Place of Marı	Place of Marriage:	
Reason for Request: (circle one)	Travel	Social Security	Employment	
Name Change Soc	ial Services	Personal Records	Driver's License	
Number of Copies Requested: (First copy issued at \$15.00; each additional copy at \$10.00)				
	PLEASE MAKE CHECK PAYABLE TO: TOWN OF NEWPORT			
NEW HAMPSHIRE LAW REQUIRES THAT A NONREFUNDABLE SEARCH FEE BE COLLECTED FOR EACH RECORD REQUESTED. IF THE RECORD IS LOCATED AND YOU MEET ELIGIBILITY REQUIREMENTS, YOU WILL BE ISSUED THE REQUESTED NUMBER OF CERTIFIED COPIES OF THAT RECORD.				
Name of Person Making Reque	ne of Person Making Request: Relationship:		tionship:	
Address:				
Signature:		Tele	phone:	

NOTICE: Any person shall be guilty of a CLASS B Felony if he/she willfully and knowingly makes any false statement in an application for a certified copy of a vital record. (RSA 5-C:9)

If making request by mail please include a copy of photo ID and self addressed stamped envelope