

INSTRUCTIONS

FOR ALL APPLICANTS 18 YEARS OF AGE AND OVER

YOU MUST MAIL THE FOLLOWING:

1. **COMPLETED** APPLICATION SIGNED BY BOTH PARTIES
2. COPIES OF **SIGNED** SOCIAL SECURITY CARDS FOR BOTH PARTIES (NAMES MUST MATCH APPLICATION)
3. COPIES OF PICTURE IDENTIFICATION FOR BOTH PARTIES (NAMES MUST MATCH APPLICATION)
4. **MONEY ORDER FOR \$40.00** PAYABLE TO PICKENS COUNTY PROBATE COURT
5. **SELF ADDRESSED ENVELOPE WITH 70 CENTS POSTAGE AFFIXED**

TO:

PICKENS COUNTY PROBATE COURT
MARRIAGE LICENSE
222 MCDANIEL AVE., B-16
PICKENS, SOUTH CAROLINA, 29671

PLEASE NOTE THAT MAIL WILL BE QUARANTINED FOR 48 HOURS BEFORE WE CAN PROCESS.

*****YOU ARE REQUIRED TO ENCLOSE A SELF ADDRESSED STAMPED ENVELOPE FOR YOUR LICENSE TO BE MAILED TO YOU!!*****

PLEASE CALL 898-5903 WITH ANY QUESTIONS TO AVOID DELAYING THIS PROCESS

Note: Groom is always Applicant A

STATE OF SOUTH CAROLINA
APPLICATION FOR LICENSE AND CERTIFICATE OF MARRIAGE

PICKENS

COUNTY

APPLICANT INFORMATION

PLEASE CHECK APPROPRIATE BOX FOR EACH APPLICANT

A BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/>	NAME (First) (Middle) (Last) (Suffix)				LAST NAME ON BIRTH CERTIFICATE (If Different)
	(1)				(2)
	BIRTHPLACE (State or foreign country)		RACE		SEX
	(3)		(4)		(5)
B BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/>	BIRTHDATE (Month, Day, Year)		AGE	NO. OF THIS MARRIAGE (1st, 2nd, etc.)	
	(6)		(7)	(8)	
	RESIDENCE (Street and Number)				PHONE NUMBER
	(9a)				
CITY, TOWN OR LOCATION		COUNTY		STATE OR FOREIGN COUNTRY	
(9b)		(9c)		(9d)	
A BRIDE <input type="checkbox"/> GROOM <input type="checkbox"/>	NAME (First) (Middle) (Last) (Suffix)				LAST NAME ON BIRTH CERTIFICATE (If Different)
	(10)				(11)
	BIRTHPLACE (State or foreign country)		RACE		SEX
	(12)		(13)		(14)
BIRTHDATE (Month, Day, Year)		AGE	NO. OF THIS MARRIAGE (1st, 2nd, etc.)		
(15)		(16)	(17)		
RESIDENCE (Street and Number)				PHONE NUMBER	
(18)					
CITY, TOWN OR LOCATION		COUNTY		STATE OR FOREIGN COUNTRY	
(18b)		(18c)		(18d)	

WE CERTIFY THAT WE HAVE SUCCESSFULLY COMPLETED A PREMARITAL PREPARATION COURSE THAT SATISFIES THE QUALIFICATIONS SET FORTH IN S.C. CODE SECTION 20-1-230. Yes NO

(19) **IF YES, MUST INCLUDE CERTIFICATE OF COMPLETION WITH THIS APPLICATION.**

We hereby make application for a marriage license and solemnly swear that all of the statements contained in the above application are true. We further make oath that there is no legal impediment to such marriage.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment by contempt.

SIGNATURE OF APPLICANT A

SOCIAL SECURITY NUMBER

SIGNATURE OF APPLICANT B

SOCIAL SECURITY NUMBER