



OFFICE OF THE COUNTY OF TULARE
ASSESSOR/CLERK-RECORDER

221 S. Mooney Blvd. • Room 105 • Visalia, CA 93291

Tara K. Freitas, CPA
Assessor/Clerk-Recorder

TULARE COUNTY CLERK-RECORDER APPLICATION FOR MARRIAGE RECORD

PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS APPLICATION

Please have your ID ready if you are submitting this form in person.

Pursuant to Health and Safety Code 103526, the following individuals are entitled to an
AUTHORIZED Certified Copy of a record.

- * The registrant (one of the parties to the marriage).
- * A party entitled to receive the record as a result of a court order (include a certified copy of the court order with this request).
- * A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business.
- * A parent, legal guardian, child, grandparent, grandchild, sibling, spouse, or domestic partner of the registrant.
- * An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate (if by power of attorney, include a copy of the power of attorney with this request).

Those who **are not authorized** by law to receive a certified copy of a non-confidential (public) marriage record will receive a certified copy marked "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY".

MAIL REQUESTS FOR AUTHORIZED COPIES **MUST BE** ACCOMPANIED BY A NOTORIZED CERTIFICATE OF IDENTITY.

I am requesting an AUTHORIZED copy

I am requesting an INFORMATIONAL copy

Number of copies

| | | | |
|---|---|----------------------|----------------------|
| 1 | Date of marriage - Fecha de matrimonio | | |
| | Month - Mes | Day - Dia | Year - Ano |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | | |
|---|--|-------------------------|----------------------|
| 2 | Name of party 1 - Nombre de contrayente | | |
| | First - Primer nombre | Middle - Segundo nombre | Last - Apellido |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | | | |
|---|--|-------------------------|----------------------|
| 3 | Name of party 2 - Nombre de contrayente | | |
| | First - Primer nombre | Middle - Segundo nombre | Last - Apellido |
| | <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|---|--|
| 4 | Relationship to person listed in Section 2 or 3 - Relacion de persona en numero 2 o 3 seccion |
| | <input type="text"/> |

| | |
|---|---|
| 5 | Contact Information (please complete) |
| | Name: <input type="text"/> |
| | Mailing Address: <input type="text"/> |
| | City: <input type="text"/> State: <input type="text"/> Zip Code: <input type="text"/> |
| | Phone Number: <input type="text"/> |

| | |
|---|---|
| 6 | Sworn Statement (please complete) |
| | I <input type="text"/> swear (or affirm) that I am an authorized <small>Print full name - Nombre completo</small> |
| | person, as defined in California Health and Safety Code Section 103526(c), and am eligible to receive an AUTHORIZED certified copy of the record identified on this application form. |
| | Sworn this date <input type="text"/> , <input type="text"/> , <input type="text"/> <small>Day - Dia Month - Mes Year - Ano</small> |
| | at <input type="text"/> <small>City and state - Ciudad y estado</small> |
| | Signature - Firma : <input type="text"/> |

| | |
|--------------------------------|----------------------|
| Clerk-Recorder Use Only | |
| Authorized Copy: | <input type="text"/> |
| Informational Copy: | <input type="text"/> |
| Number of Copies: | <input type="text"/> |
| Certificate: | <input type="text"/> |
| Book: | <input type="text"/> |
| Page: | <input type="text"/> |
| Info: | <input type="text"/> |
| Imaged: | <input type="text"/> |
| Free: | <input type="text"/> |
| No Record: | <input type="text"/> |
| Gov't Use: | <input type="text"/> |
| A/C: | <input type="text"/> |
| B/N: | <input type="text"/> |

Driver's License or ID#: Exp:



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CERTIFICATE OF IDENTITY - BIRTH, DEATH AND MARRIAGE

In accordance with California State Law, the following identifying information is required to obtain a certified copy of a Birth, Death or Marriage Certificate. You must be one of the following to receive an authorized copy of a birth, death or marriage certificate: individual named on the certificate, parent, legal guardian/custodian, grandparent, grandchild, child, sibling, spouse/domestic partner, attorney for individual/estate of individual or representative of an adoption agency.

This certificate must be signed in the presence of a Notary.

Table with 2 columns: Name on Certificate, Relationship. Includes fields for Name of Requestor* and Signature of Requestor* at the bottom.

* Requestor must be the person who signed sworn statement on accompanying Application(s)

Please indicate the total number of certificates requested: _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____
County of _____

On _____ before me, _____ personally appeared _____
(name and title of officer) (insert name of person signing)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.

Signature _____ (seal)

INSTRUCTIONS

TULARE COUNTY CLERK-RECORDER-APPLICATION FOR MARRIAGE RECORD

Marriage records have been maintained in the Tulare County Clerk-Recorder's Office since 1852.

NOTE: If the Marriage License was not issued in Tulare County, then the Tulare County Clerk-recorder will not have the Marriage Certificate. Please order the Marriage Certificate from the county where the license was issued.

1. You must complete the Application for Marriage Record and give all the information you have available to identify the Marriage Record when you submit your request by mail. If the information you furnish is incomplete or inaccurate, it may be impossible to locate the record. You must sign the Sworn Statement, 2nd page, and you must also sign the Certificate of Identity, 3rd page, in the presence of a Notary Public.

PLEASE NOTE: Only one notarized Certificate of Identity statement is required for multiple certificates requested at the same time. However, the Certificate of Identity statement must include the name of each individual whose marriage certificate you wish to obtain and your relationship to that individual

2. Use a separate Application form (2nd page only) for each different certified marriage record you are requesting, and remember to identify each certificate name requested on the Certificate of Identity (3rd page of application).
3. Submit \$17.00 for each certified copy requested. If no record of the marriage is found, the \$17.00 fee will be retained for searching as required by statute (Health and Safety Code Section 103650), and a Certificate of No Record will be issued. If you are mailing your request, indicate the number of certified copies you are requesting and include your payment with this application in the form of a personal check, postal or bank money order (International Money Order only for out-of-country requests) made payable to:

TULARE COUNTY CLERK-RECORDER
221 S MOONEY BLVD RM 105
VISALIA CA 93291- 4593

Note: Credit Card orders may be processed online at www.vitalchek.com. Additional costs apply for processing orders using a credit card. Please follow the directions on the VitalChek website if using a credit card.