## State of Maine Department of Health and Human Services Intention of Marriage Application (VS-2A)

Please type or print with black ink

Party A (check of	,	□ Bride		Groom		pouse	Prop	posed	Date of Marriage:
(Parties under the age of 18 are <b>not</b> permitted to be married in the State of Maine.)  1. Current Name (First, Middle, Last, Suffix)									
2. Name Prior to First Marriage (First, Middle, Last, Suffix)									
3. Birthplace State	irthplace State 4. Birthplace Country 5. Da				rth <i>(mm/dd/yy</i> y	<i>ry)</i> 6. <i>A</i>	Age		Sex/Gender: Male □ Female Nonbinary X
8. Father/Parent Name Prior to First Marriage (First, Marriage)					Last, Suffix)	9. Birtl	9. Birthplace State		10. Country
11. Mother/Parent Name Prior to First Marriage (First, Middle, Last, Suffix)						12. Birthplace State			13. Country
14. Party A Residence Address (Street number, name and/o					designator) 15. City/Tow				
16. County	County 17. State				18. Country			19. Zip Code	
20. Party A Mailing Address (Street or PO) (Apt/Unit)  21. City/T							/Town		
22. County	. County 23. State				24. Country				25. Zip Code
26. Party A Telephone Number (10 digits)  27. Party A E-mail Address (If applicable)								licable)	
28. Party A Proposed New Name After this Marriage (First, Middle, Last, Suffix)  29. Social Security Number*									
30. Number of this Marriage: (First, Second, etc.)				31. If Previously Married, Last Marriage Ended by:  □ Death □ Divorce □ Annulment					
32. Date Last Marriage Ended (mm/dd/yyyy) 33. Name of Former Spouse (First, Middle, Last, Suffix)									
34. Name and Location of Court or City/State and Country of Death									
35. Is Party A registered with the State of Maine as a Domestic Partner? □ Yes □ No									
36. First cousins are required by law to obtain a certificate of genetic counseling by a physician. Are you first cousins?									
Signed Certification that I am free to mar marriages performed	ry under tl	he laws of Main	informa	ation ab	ove is correct to d this "intention				
Signature of Party A							Da	Date Signed	
The above-named party has personally appeared before me and made oath to the truth and foregoing statement.  Notaries, please do not use a notary seal, embosser or stamp on marriage intentions or marriage licenses.									
Signature of Notary Public or Filing Official				Printed Name				Date Signed	
My Term Expires City/Town				County				Stat	e

\*Federal law requires the collection of Social Security numbers from applicants for a marriage license. (42 USC §666). *The SSN is confidential information and may not be disclosed (1 M.R.S. §402 (3)(N)*. This document (the "State of Maine Intentions of Marriage" application) becomes a public record 50 years *after* the date on this intention to marry application (19-A M.R.S. §651). Because the SSN is confidential information that may *not* be disclosed, it must be deleted (redacted) from this document before it is open for public inspection after 50 years. The Social Security number (SSN) is retained by the State Agency and the municipal clerks responsible for the administration of the system of vital statistics.

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Please type or print with black ink

Party B (check o	,	□ Bride		Groom		ouse		posed	Date of Marriage:		
(Parties under the age of 18 are not permitted to be married in the State of Maine.)  37. Current Name (First, Middle, Last, Suffix)											
38. Name Prior to First Marriage (First, Middle, Last, Suffix)											
39. Birthplace State	Birthplace State 40. Birthplace Country 41. D				Date of Birth (mm/dd/yyyy) 42.				Age 43. Sex/Gender:  □ Male □ Female  □ Nonbinary X		
44. Father/Parent Name Prior to First Marriage (First, Middle, Last, Suffix) 45. Birthplace St							State	46. Country			
47. Mother/Parent Name Prior to First Marriage (First, Middle, Last, Suffix) 48. Birthplace S							State	tate 49. Country			
50. Party B Residence Address (Street number, name and/or designator) 51. City/Town											
52. County	County 53. State				54. Country			55. Zip Code			
56. Party B Mailing Address (Street or PO) (Apt/Unit) 57. City/T							City/Town				
58. County	County 59. State				60. Country				61. Zip Code		
62. Party B Telephone Number (10 digits) 63. Party B E-mail Address (If applicable)											
64. Party B Proposed New Name After this Marriage (First, Middle, Last, Suffix)  65. Social Security Number*											
66. Number of this Marriage: (First, Second, etc.)  67. If Previously Married, Last  □ Death □ Divorce											
68. Date Last Marriage Ended (mm/dd/yyyy) 69. Name of Former Spouse (First, Middle, Last, Suffix)											
70. Name and Location of Court or City/State and Country of Death											
71. Is Party B registered with the State of Maine as a Domestic Partner? □ Yes □ No											
72. First cousins are required by law to obtain a certificate of genetic counseling by a physician. Are you first cousins?											
Signed Certification that I am free to mar marriages performed	ry under t	he laws of Main	inform ne. I ur	ation ab	ove is correct t d this "intention		_				
							Da	nte Signed			
The above-named party has personally appeared before me and made oath to the truth and foregoing statement.  Notaries, please do not use a notary seal, embosser or stamp on marriage intentions or marriage licenses.											
Signature of Notary Public or Filing Official					Printed Name				Date Signed		
My Term Expires City/Town				County			Sta	te			

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**INSTRUCTIONS FOR PARTIES:** Complete every item carefully. Please type or neatly print. BLACK ink is preferred. Check the boxes and sign the certification portion in the presence of a notary public or a municipal clerk. If the parties are Maine residents, file the completed marriage intentions with the municipality in which at least one party resides or the State Registrar of Vital Statistics. If neither party is a Maine resident, the parties may file the completed intentions in any municipality in the State of Maine or with the State Registrar of Vital Statistics.

#### **Previously Married Parties**

Parties who have been previously married must present a certified copy of the death certificate of their deceased spouse or the record of their divorce or annulment before a marriage license can be issued. A record of divorce from another state or foreign country is evidence of divorce. If the record is not in English, it must be translated into English by a disinterested 3rd person at the parties' expense. A marriage contracted when either party fails to submit a certificate or certified copy of the divorce decree or annulment of the last marriage or the death certificate of the last spouse, or when either party makes false representations about previous marriages to obtain a marriage license, the marriage will become VOID.

#### Parties under 18 Years of Age

Effective September 25, 2025, parties under the age of 18 are **not** permitted to be married in the State of Maine.

Marriages of emancipated minors are treated as if the child is an adult of 18 years or older. Municipal clerks must be presented with court documents to ascertain the minor's legal status before issuing a marriage license.

#### **Related Parties (First Cousins)**

If parties are related as specified by Title 19-A §701 subsection 2, the parties must provide a signed certification from a physician stating that they have received genetic counseling.

### **Incarcerated Parties**

If either of the parties to the marriage is incarcerated in a state correctional facility (prison or jail), a marriage license may be issued (after filing the intentions) without the incarcerated party's original signature on the marriage license. A letter from the facility in which the party is incarcerated must be provided to the issuing official to obtain the marriage license. The letter must be on the facility's letterhead and state that the party is incarcerated. The signature of the incarcerated party must be obtained on the marriage license at the time the ceremony is performed.

#### **Imminent Death**

An authoritative request must be presented at the time marriage intentions are filed from a minister, clergyman, priest, rabbi, or attending physician stating that the death of either party is imminent. The authoritative request must be on the facility letterhead, name the patient, state that death is imminent, and state that the patient is conscious and coherent. The patient must make it known that it is their wish to be married and sign the letter in addition to the signature and printed name of the minister, clergyman, priest, rabbi, or attending physician who is declaring that the death is imminent.

#### **Marriage License**

Once the marriage intentions have been filed, a marriage license may be issued and is valid for 90 days from the date the intentions were filed. Each party to the intended marriage must sign the marriage license in the presence of a municipal clerk, marriage officiant, or the State Registrar to acknowledge the certification statement on the marriage license. The parties are to provide the marriage license to the marriage officiant who will solemnize the marriage by performing a marriage ceremony, completing the marriage ceremony section on the marriage license, and obtaining the original signatures of two witnesses who must be physically present during the ceremony. The officiant or the parties must return the marriage license to the issuing authority that issued the marriage license within 15 working days after the ceremony was performed. Completed marriage licenses returned after 15 working days from the date the ceremony was performed will be marked as a late filing.