

# WORK SHEET FOR PREPARATION OF MARRIAGE LICENSE FORM

LICENSE NUMBER		COUNTY				
<b>1a. NAME</b>					<b>1b. LAST NAME PRIOR TO FIRST MARRIAGE (IF APPLICABLE)</b>	
<b>FIRST</b>	<b>MIDDLE</b>	<b>LAST</b>				
<b>1c. GENDER (Optional)</b>	<b>2a. RESIDENCE-STATE</b>	<b>2b. COUNTY</b>	<b>2c. CITY, TOWN, OR LOCATION</b>		<b>2d. INSIDE CITY LIMITS (Specify Yes or No)</b>	
<b>2a. STREET AND NUMBER</b>		<b>3. BIRTHPLACE (COUNTY &amp; STATE)</b>		<b>4a. DATE OF BIRTH (Month, Day, Year)</b>	<b>4b. AGE</b>	
<b>5a. PARENT'S NAME AT PARENT'S BIRTH</b>		<b>5b. STATE OF BIRTH</b>		<b>5c. ADDRESS (if living)</b>		
<b>6a. PARENT'S NAME AT PARENT'S BIRTH</b>		<b>6b. STATE OF BIRTH</b>		<b>6c. ADDRESS (if living)</b>		
<b>7. RACE (Optional)</b>	<b>8. NUMBER OF THIS MARRIAGE - FIRST, SECOND, ETC. (Specify)</b>	<b>IF PREVIOUSLY MARRIED</b>		<b>10. EDUCATION - SPECIFY HIGHEST GRADE COMPLETED</b>		
		<b>9a. LAST MARRIAGE ENDED BY: Death, Divorce, Or Annulment (Specify)</b>		<b>9b. DATE</b>		
				MONTH	YEAR	
				(0, 1, 2, 3, 4, ... or 8)	ELEMENTARY	HIGH SCHOOL
						COLLEGE
						(1, 2, 3, 4, or 5)
						(1, 2, 3, 4, or 5)
<b>11a. NAME</b>					<b>11b. LAST NAME PRIOR TO FIRST MARRIAGE (IF APPLICABLE)</b>	
<b>FIRST</b>	<b>MIDDLE</b>	<b>LAST</b>				
<b>11c. GENDER (Optional)</b>	<b>12a. RESIDENCE-STATE</b>	<b>12b. COUNTY</b>	<b>12c. CITY, TOWN, OR LOCATION</b>		<b>12d. INSIDE CITY LIMITS (Specify Yes or No)</b>	
<b>12a. STREET AND NUMBER</b>		<b>13. BIRTHPLACE (COUNTY &amp; STATE)</b>		<b>14a. DATE OF BIRTH (Month, Day, Year)</b>	<b>14b. AGE</b>	
<b>15a. PARENT'S NAME AT PARENT'S BIRTH</b>		<b>15b. STATE OF BIRTH</b>		<b>15c. ADDRESS (if living)</b>		
<b>16a. PARENT'S NAME AT PARENT'S BIRTH</b>		<b>16b. STATE OF BIRTH</b>		<b>16c. ADDRESS (if living)</b>		
<b>17. RACE (Optional)</b>	<b>18. NUMBER OF THIS MARRIAGE - FIRST, SECOND, ETC. (Specify)</b>	<b>IF PREVIOUSLY MARRIED</b>		<b>20. EDUCATION - SPECIFY HIGHEST GRADE COMPLETED</b>		
		<b>19a. LAST MARRIAGE ENDED BY: Death, Divorce, Or Annulment (Specify)</b>		<b>19b. DATE</b>		
				MONTH	YEAR	
				(0, 1, 2, 3, 4, ... or 8)	ELEMENTARY	HIGH SCHOOL
						COLLEGE
						(1, 2, 3, 4, or 5)
						(1, 2, 3, 4, or 5)

DHHS 1607 (Revised 11/2016)  
N.C. Vital Records

N.C. DEPARTMENT OF HEALTH AND HUMAN SERVICE

<u>RACE (Optional)</u>	<u>ABBREVIATIONS</u>
White	Wht
Black	Blk
African-American	AfrAm
American Indian	AmInd
Alaska Native	AlaNat
Asian Indian	AsInd
Chinese	Chin
Fillpino	Fill
Japanese	Japa
Korean	Kore
Vietnamese	Viet
Other Asian	OAsi

<u>RACE (Optional)</u>	<u>ABBREVIATIONS</u>
Native Hawaiian	NatHaw
Guamarian	Guam
Chamorro	Cham
Samoan	Samo
Other Pacific Islander	OPacIs
Mexican	MexI
Mexican-American	MexAm
Chicano	Chica
Puerto Rican	PueRI
Cuban	Cuba
Other Spanish/Hispanic/Latino	OSpHiLa
Other	Oth

**PHONE NUMBER FOR APPLICANT 1:** \_\_\_\_\_

**PHONE NUMBER FOR APPLICANT 2:** \_\_\_\_\_

**STATE OF NORTH CAROLINA**  
**County of Mitchell**

**AFFIDAVIT OF ELIGIBILITY TO MARRY**

Please answer the following questions relative to your capacity to marry under the General Statutes of NC (GS 51):

1. Do you plan to be married in Mitchell County, NC?  
Answer \_\_\_\_\_yes or \_\_\_\_\_no
  
2. Are you now eighteen (18) years of age or older?  
(Applicant 1 \_\_\_\_\_yes or \_\_\_\_\_no) (Applicant 2 \_\_\_\_\_yes or \_\_\_\_\_no)
  
3. Are you at this time a legally unmarried person?  
(Applicant 1 \_\_\_\_\_yes or \_\_\_\_\_no) (Applicant 2 \_\_\_\_\_yes or \_\_\_\_\_no)
  
4. Are you and the person with whom you have applied related and closer kin than first cousins?  
Answer \_\_\_\_\_yes \_\_\_\_\_no
  
5. Are you mentally and physically competent to marry?  
(Applicant 1 \_\_\_\_\_yes or \_\_\_\_\_no) (Applicant 2 \_\_\_\_\_yes or \_\_\_\_\_no)
  
6. Do you understand the questions in this application for license to marry made by you on this date and do you swear (or affirm) that the answers you have given in this application are true to the best of your knowledge and belief, so help you GOD?  
(Applicant 1 \_\_\_\_\_yes or \_\_\_\_\_no) (Applicant 2 \_\_\_\_\_yes or \_\_\_\_\_no)

\_\_\_\_\_  
Signature of Applicant 1

\_\_\_\_\_  
Signature of Applicant 2

STATE OF NC  
County of Mitchell

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_.

KATHY LAWS, REGISTER OF DEEDS

By: \_\_\_\_\_

(Seal)