

**Town of Goshen, Connecticut  
42 North Street , Goshen, CT 06756-0187  
Phone: (860) 491-2308**

**Marriage License Request Form**

Town Clerk  
Registrar of Vital Statistics  
42C North Street  
Goshen, Connecticut 06756  
860-491-3647

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NOTE: Legal fee for vital record copies is \$20.00 for each certified copy

Number of Copies \_\_\_\_\_ X \$20.00/ copy = Total \$ \_\_\_\_\_\*\*

**APPLICATION FOR COPY OF MARRIAGE LICENSE**

Groom's Full Name \_\_\_\_\_  
(First name) (Last name)

Bride's full maiden name \_\_\_\_\_  
(First name) (Maiden name)

Date of Marriage \_\_\_\_\_  
(Month) (Day) (Year)

Place of Marriage \_\_\_\_\_

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Person Requesting this information:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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\*\* Please make check payable the Goshen Town Clerk

**REQUESTER MUST ATTACH A COPY OF PICTURE**

**IDENTIFICATION AND VERIFICATION OF RELATIONSHIP TO**

**REGISTRANT**