

**STATE OF SOUTH CAROLINA  
APPLICATION FOR LICENSE AND CERTIFICATE OF MARRIAGE**

LICENSE NUMBER \_\_\_\_\_

COUNTY \_\_\_\_\_

**APPLICANT INFORMATION**

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

I CERTIFY THAT THE COUPLE HAS SUCCESSFULLY COMPLETED A PREMARITAL PREPARATION COURSE THAT SATISFIES THE QUALIFICATIONS SET FORTH IN S C CODE SECTION 20-1-230. Yes  No   
(19)

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.

SUBSCRIBED AND SWORN TO BEFORE ME THIS

\_\_\_\_\_  
SIGNATURE OF APPLICANT A

(Date) \_\_\_\_\_ AT \_\_\_\_\_ (Time)

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
SIGNATURE OF APPLICANT B

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
PROBATE JUDGE (DEPUTY/ASSISTANT)

**PARENT'S CONSENT**

\_\_\_\_\_ being first duly sworn deposes and says that he/she is the \_\_\_\_\_  
Consentor's Full Name (Type or Print) Relationship to Applicant

of \_\_\_\_\_ who was born on \_\_\_\_\_ in \_\_\_\_\_ that he/she hereby consents to  
Applicant's Full Name (Type or Print) Month/Day/Year County

his/her marriage to \_\_\_\_\_  
Full Name of Bride/Groom/Spouse Signature of Parent

Subscribed and sworn to before me this \_\_\_\_\_ Date Probate Judge Deputy/Assistant