

**Press the print button below and take to the County Clerk's office or mail to address below.
Appropriate identification must accompany request.**

Livingston County Clerk

200 E. Grand River
Howell, Michigan 48843

Marriage License Request

Number of copies required: _____

Please enter all of the information below as it appears on the record.

Full Name of the Groom: _____

Full Name of the Bride: _____
(At time of marriage (i.e.: maiden name))

Date of Marriage: _____

Place of Marriage: (City of Township): _____

I the undersigned, hereby certify that the forgoing is true to the best of my knowledge and belief, and the record is being obtained for lawful purposes.

Signature of applicant _____

Mail to:

Full Name	Drivers License Number
Street Number	Telephone Number
City , State, Zip Code	Social Security Number (optional)