INSTRUCTIONS FOR MARRIAGE LICENSE
BY MAIL

JEFFERSON COUNTY AUDITOR
PO Box 563, Port Townsend WA 98368

Marriage License (360) 385-9116

Fully complete the Online Marriage Application at:
http://www.co.jefferson.wa.us/auditor/Default.asp
Click the "On-line Marriage Application" button on the left side of the screen under
Quick Links, once submitted write the EM-Number at the bottom of this page.

This Application for Marriage License by Mail must be completed and signed by both
applicants, and the signatures must be notarized. The notary must stamp their seal next
to both signatures. Individuals who are seventeen years must have parental-guardian
consent, and their signatures must also be notarized. Applicants who are sixteen or
younger, must have parental-guardian consent, and submit a court order with the
application.

Return the application with a check or money order, payable to Jefferson County Auditor,
in the amount of $44.00. Mail to Jefferson County Auditor, PO Box 563 Port Townsend,
WA 98368. Once the completed application and fees have been processed in our office,
there is a three-day waiting period before the marriage can take place, and the marriage
license is valid for 60 days. The Ceremony must take place in the State of Washington.

Please advise us on where to forward the marriage license packet. This packet contains
all the required documents needed for the marriage ceremony. Also please provide us
with a daytime phone number, Social Security numbers for both applicants, and the
Electronic Marriage number from your Online Marriage Application. Without this
information, we will not be able to process your marriage application.

(Applicant A) Printed Name: ________________________________
Social Security #: ________________________________

(Applicant B) Printed Name: ________________________________
Social Security #: ________________________________

Address where you would like your Marriage packet mailed: ________________________________

Daytime Phone Number: ________________________________

EM-NUMBER from Online Marriage Application: ________________________________
License Number: ____________________

Application and Affidavit for Marriage License (Applicant A)

State of WASHINGTON
County of Jefferson

I, the undersigned, do solemnly swear or affirm, that the information on this form is true: that I am eighteen years of age or older or qualify per consent form; I am not afflicted with any contagious sexually transmitted disease, or if so, the condition is known to the other applicant; that I am not related to the other applicant; and, further, that I do not currently have a spouse or a registered domestic partner other than the other party to this marriage. Marriage license is not valid for 3 days from date of application and is void if marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.

Birth Date ________ Age _____ Birth Place __________________________ (Check One) Male ☐ Female ☐

(Check One) Single ☐ Widowed ☐ Divorced ☐ Under Control of Guardian ☐

Address Present __________________________ County ____________

Address Past Six Months __________________________ County ____________

Name __________________________________________

Signature X ________________________________________

Subscribed and sworn to before me on this _______ day of ________________, ____________

Deputy Auditor/Notary Public __________________________

Application and Affidavit for Marriage License (Applicant B)

State of WASHINGTON
County of Jefferson

I, the undersigned, do solemnly swear or affirm, that the information on this form is true: that I am eighteen years of age or older or qualify per consent form; I am not afflicted with any contagious sexually transmitted disease, or if so, the condition is known to the other applicant; that I am not related to the other applicant; and, further, that I do not currently have a spouse or a registered domestic partner other than the other party to this marriage. Marriage license is not valid for 3 days from date of application and is void if marriage is not solemnized in the State of Washington within sixty (60) days of issuance of license.

Birth Date ________ Age _____ Birth Place __________________________ (Check One) Male ☐ Female ☐

(Check One) Single ☐ Widowed ☐ Divorced ☐ Under Control of Guardian ☐

Address Present __________________________ County ____________

Address Past Six Months __________________________ County ____________

Name __________________________________________

Signature X ________________________________________

Subscribed and sworn to before me on this _______ day of ________________, ____________

Deputy Auditor/Notary Public __________________________