



**TOWN OF SOLON**  
*Office of the  
 Municipal Clerk & Tax Collector*

*APPLICATION FOR A  
 CERTIFIED COPY OF A  
 MARRIAGE RECORD*

Certified Copies: \$15.00/first copy, \$6.00/each additional copy of the same record purchased at the same time.  
 Non-Certified Copies: \$10.00/first copy, \$.25 for additional photocopies.  
*Cash, check, credit & debit card accepted. Make check payable to "Town of Solon"*

Please fill in the following information for location and record identification.

**\*\*PLEASE PRINT\*\***

Full Maiden Name of Spouse 1/Bride: \_\_\_\_\_

Full Maiden Name of Spouse 2/Groom: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Number of Copies Requested: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Indicate your Relationship to the person on requested record below:

- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> Self                        | <input type="checkbox"/> Parent       | <input type="checkbox"/> Attorney of person on record  |
| <input type="checkbox"/> Spouse                      | <input type="checkbox"/> Guardian     | <input type="checkbox"/> Genealogist ID # _____        |
| <input type="checkbox"/> Registered Domestic Partner | <input type="checkbox"/> Descendant** | <input type="checkbox"/> Direct & Legitimate Interest* |

\*Provide proof of Direct & Legitimate Interest (list proof provided): \_\_\_\_\_

\*\*If descendent, please detail lineage: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

*By signing, I swear/affirm that the information above is true and correct.*

*Below line is for Clerk's use only*

**Proof of identity of applicant:**

*Applicant must provide one of these:*

- |                                      |   |                                   |   |
|--------------------------------------|---|-----------------------------------|---|
| <input type="checkbox"/> Known to me | <input type="checkbox"/> Driver's License | <input type="checkbox"/> Passport | <input type="checkbox"/> Government issued picture I.D. |
|--------------------------------------|---|-----------------------------------|---|

**OR two of these:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Utility bills                    | <input type="checkbox"/> Department of Corrections I.D.                              | <input type="checkbox"/> License/rental agreement  |
| <input type="checkbox"/> Bank statements                  | <input type="checkbox"/> Social Security Card  | <input type="checkbox"/> Pay stub                  |
| <input type="checkbox"/> Vehicle registration             | <input type="checkbox"/> Letter from government agency requesting record (DHHS, WIC) | <input type="checkbox"/> W-2                       |
| <input type="checkbox"/> Income tax return                | <input type="checkbox"/> DD 214  | <input type="checkbox"/> Voter Registration card   |
| <input type="checkbox"/> Personal Check w/ address        | <input type="checkbox"/> Hospital; birth worksheet                                   | <input type="checkbox"/> Disability award from SSA |
| <input type="checkbox"/> A previously issued vital record |  | <input type="checkbox"/> Other _____               |

**Establishing eligibility to acquire record:**

- Related applicants must provide proof of lineage.
- Domestic Partners must provide proof of registration of domestic partnership
- Attorneys must provide a signed, notarized release from family
- Genealogists must provide a state-issued card

**Status of vital record:**

- Certified copy of Closed Record (*application and proof of identity and lineage required*)
- Certified copy of Open Public Record (*application and proof of identity and lineage required*)
- Non-Certified copy of Open Public Record (*application and proof of identity only*)

Do not retain copies of proof provided or note any specific numbers

Issuing Clerk's Initials \_\_\_\_\_

*If the record is an open public record, a non-certified copy of the complete record, including statistical information, may be issued, if requested. The record is considered an open public record if it is 75 years old or older for births, 50 years old or older for marriages, 25 years old or older for deaths and 50 years old or older for fetal deaths or still births. If the requester requests a certified copy of any record, open or closed to the public, proof of relationship or direct and legitimate interest must be shown.*