Town of North Harmony Office of the Town Clerk, Stephanie Gibbs 5350 Stow Rd. Ashville, N.Y. 14710 716-789-3445 Ext. 2

APPLICATION FOR ONE-DAY MARRIAGE OFFICIANT LICENSE

Applicant Name	Telephone #
Mailing Address	Email
Proof of identity presented	Date of Birth
Persons to be married (as appears on the marriage I	license)
Name	Name
Address	Address
Date of Birth	
I duly swear/affirm that the information provided ab	pove is true and accurate.
Date	Applicant
Subscribed & sworn to/affirmed before me	Town Clerk/Deputy Town Clerk
License granted thisday of	, 20
	Town Clerk/Deputy Town Clerk
Note: This license is valid only for the parties to be marriage ceremony or the expiration of the marriage	• •
State of County of	
individual whose name is subscribed to the within instrun	ne, the undersigned Notary Public, personally appeared to me or proved to me based on satisfactory evidence to be the ment t and acknowledged to me that he/she executed the same in crument, the individual, or person upon behalf of which the
, Notary Public	