



Marriage Record Correction Application

Cartridge/Image _____

Marriage has taken place _____

Marriage has not taken place _____

The associated marriage is between – Complete using the information as shown on the record

Applicant 1	Applicant 1 first name		Applicant 1 middle name		Applicant 1 last name		Name suffix (Jr, Sr, I, II, III, etc)	
	Applicant 1 date of birth (MM/DD/YYYY)			Applicant 1 email address			Applicant 1 phone (xxx-xxx-xxxx)	
Applicant 2	Applicant 2 first name		Applicant 2 middle name		Applicant 2 last name		Name suffix (Jr, Sr, I, II, III, etc)	
	Applicant 2 date of birth (MM/DD/YYYY)			Applicant 2 email address			Applicant 2 phone (xxx-xxx-xxxx)	

Requester information – information about you

I am requesting that Hennepin County amend the marriage record because:

Requester name	Requester address
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I have attached the following documentation in support of my request (if available/needed):

- I am
- Applicant 1 and Applicant 2
 - The person who officiated the marriage ceremony (complete Officiant section on the back)
 - A representative of Hennepin County

What item(s) do you want added, deleted or amended?	How do you want the information to show on the record?
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Item to add/delete/amend	Show on record as
Item to add/delete/amend	Show on record as
Item to add/delete/amend	Show on record as
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Item to add/delete/amend	Show on record as
Item to add/delete/amend	Show on record as
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REQUIRED – Requester (applicant 1) sign this application in front of a Notary Public

I certify that the information provided on this application is accurate and complete to the best of my knowledge.

Your (requester's) signature		Notary Stamp/Seal
Sworn to/affirmed before me on _____ day of _____, 20_____		
Printed name of notary public		
Notary public signature	My commission expires	

REQUIRED – Requester (applicant 2) sign this application in front of a Notary Public

I certify that the information provided on this application is accurate and complete to the best of my knowledge.

Your (requester's) signature		Notary Stamp/Seal
Sworn to/affirmed before me on _____ day of _____, 20_____		
Printed name of notary public		
Notary public signature	My commission expires	

If OFFICIANT is the requester – sign this application in front of a Notary Public

Officiant information	Officiant name	Officiant email	Officiant phone number (xxx-xxx-xxxx)	
	Officiant street address	City	State	Zip

I certify that the information provided on this application is accurate and complete to the best of my knowledge.

Your (requester's) signature		Notary Stamp/Seal
Sworn to/affirmed before me on _____ day of _____, 20_____		
Printed name of notary public		
Notary public signature	My commission expires	



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Quantity and cost – make checks payable to: Hennepin County Treasurer		Fee
One corrected marriage document		\$40
Additional copies are \$9 each	# of additional copies	X \$9
Fees are due with the application and are non-refundable. <i>Minnesota Statutes, section 144.226.</i>		Amount due Write in total if filling out by hand
		Amount due
Send application and payment to Hennepin County Vital Records Office:		
Vital Records Office – Marriage correction Hennepin County Government Center 300 South 6 th St, Suite A025 Minneapolis MN 55487-0026		
If you have questions, please contact us at res.vitalrecords@hennepin.us or call 612-348-8919.		