



Marriage Record Affidavit and Correction Application

Package ID _____

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	Namesuffix(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	Namesuffix(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		
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?		
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		
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 Vital Records 300 South Sixth Street, MC -678B Minneapolis MN 55487-0678		
If you have questions, please contact us at vitalrecords@hennepin.us or call 612-348-8919.		