



**TEXAS**  
Health and Human  
Services

Texas Department of State  
Health Services

**OFFICE USE ONLY**

CHECK  MONEY ORDER

REMITTANCE NO. \_\_\_\_\_ CERT. # \_\_\_\_\_

DATE \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_

DOCUMENT CONTROL # \_\_\_\_\_

**MAIL APPLICATION FOR MARRIAGE OR DIVORCE RECORD**

**PLEASE PRINT CLEARLY.**

**INCLUDE A PHOTOCOPY OF YOUR (APPLICANT) VALID ID WHEN SENDING IN THE REQUEST. APPLICATION MUST BE ORIGINAL (INCLUDING SIGNATURE). NO CROSS OUT OR WHITE OUT WILL BE ACCEPTED. SEE INSTRUCTIONS ON BACK.**

**Step 1: YOUR INFORMATION AND SHIPPING ADDRESS (PLEASE PRINT)**

Your Name (First, Middle, Last Name):			
Street Address:	City:	State:	Zip Code:
Email Address:		Daytime Phone Number:	
<b>Your relationship to Person named on Certificate (Check One):</b> <input type="checkbox"/> Self <input type="checkbox"/> Child <input type="checkbox"/> Spouse <input type="checkbox"/> Parent <input type="checkbox"/> Sibling			
<input type="checkbox"/> Grandparent <input type="checkbox"/> Legal Guardian (proof required) <input type="checkbox"/> Legal Representative (proof required) <input type="checkbox"/> Other: _____			
<input type="checkbox"/> <b>I authorize mailing to the address below instead of my mailing address listed above.</b>			
Name:			
Address to Send to if different than noted above:	City:	State:	Zip Code:
<b>Reason for Request:</b>			

**Step 2: INFORMATION FOR RECORD (Must be completed to Identify Record Requested)**

FULL NAME OF SPOUSE 1:	First Name	Middle Name	Last Name
DATE OF EVENT:	Month	Day	Year
PLACE OF EVENT:	City or Town	County	<b>TEXAS ONLY</b>
FULL NAME OF SPOUSE 2:	First Name	Middle Name	Maiden Last Name (Before first marriage)
AGES OR DATES OF BIRTH AT TIME OF EVENT:	Age or Date of Birth of SPOUSE 1	Age or Date of Birth of SPOUSE 2	<b>SOCIAL SECURITY NUMBER (If known):</b>
			SPOUSE 1 - -
			SPOUSE 2 - -

**Step 3: COST & FEES (NOT REFUNDABLE, if Record Not found)**

Select Record Type:	Quantity	Price/each	Total
<input type="checkbox"/> Marriage Verification		x \$20.00	\$
<input type="checkbox"/> Divorce Verification		x \$20.00	\$
<input type="checkbox"/> Photocopy of Marriage License Application		x \$20.00	\$
<input type="checkbox"/> Heirloom Wedding Anniversary Certificate Years Commemorated: _____		x \$60.00	\$
For urgent requests, orders may be <b>EXPEDITED</b> by sending the order through an overnight mail service, such as: FEDEX, LoneStar, or UPS to our physical address: <b>DSHS – VSS MC 2096, 1100 W. 49th St., Austin, TX 78756</b> and paying the below expedited processing fee.			
<input type="checkbox"/> Expedited Processing (estimated 20-25 business days)			\$5.00
All orders are returned free of charge by USPS regular mail. For expedited return mail service, select <b>one</b> of the overnight return shipping methods below.			
<input type="checkbox"/> Overnight Return Mail (for shipping within USA)			\$8.00
<input type="checkbox"/> USPS Express Return Mail (for shipping to PO Box ONLY)			\$22.95
<input type="checkbox"/> I wish to make a voluntary contribution of \$5.00 to promote healthy early childhood by supporting the Texas Home Visitation Program administered by the Office of Early Childhood Coordination of Health and Human Services.			\$5.00
<b>Total Due:</b>			<b>\$</b>

**WARNING: IT IS A FELONY TO FALSIFY INFORMATION ON THIS DOCUMENT. THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT ON THIS FORM OR SIGNING A FORM WHICH CONTAINS A FALSE STATEMENT IS 2 TO 10 YEARS IMPRISONMENT AND A FINE OF UP TO \$10,000. (HEALTH AND SAFETY CODE, CHAPTER 195, SEC. 195.003.)**

**READ & SIGN (Applications without signatures or attached valid ID will NOT be accepted for processing)**

Signature of Applicant \_\_\_\_\_ Date Signed (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_



## MAIL APPLICATION FOR MARRIAGE OR DIVORCE RECORD

**Processing times are estimates and subject to change with an increased volume of customer applications.**  
**FAILURE TO PROVIDE INFORMATION REQUESTED ON THIS FORM MAY RESULT IN SIGNIFICANT PROCESSING DELAYS AND/OR DENIAL OF YOUR APPLICATION.**

**Walk In:** Same day service in most cases. Hours are Monday-Friday 8:00 am - 4:00 pm. DSHS - Vital Statistics Section, 1100 W. 49th St., Austin, TX 78756

**Online Orders:** Visit [www.texas.gov](http://www.texas.gov) to order online. Online orders are mailed 15-20 business days after receipt of the request.

**Mail In Orders:** Processed and mailed 6 - 8 weeks after receipt of the request. Mail to: DSHS - VSS, P.O. Box 12040, Austin, TX 78711-2040. For current processing times, please see our website at: <https://www.dshs.texas.gov/vs/processing/>.

**Expedited Orders:** Processed and mailed 20 - 25 business days after receipt of the request. **Must be sent to the Texas Department of State Health Services - Vital Statistics Section via an OVERNIGHT mail service, such as FedEx, LoneStar, or UPS to: DSHS – VSS MC 2096, 1100 W. 49th St., Austin, TX 78756**

**Marriage Verification** - A verification letter will include the registrant names, date of marriage, and place of marriage as it appears on the application for marriage license index filed with Vital Statistics. Verification letters of marriage are available for marriages that occurred from 1966 to present. Verification letters are not considered legal substitutes for marriage licenses. Vital Statistics strongly recommends that applicants ensure a verification will satisfy its intended use.

**Divorce Verification** - A verification letter will include the registrant names, date of divorce, and place of divorce as it appears on the report of divorce or annulment of marriage index filed with Vital Statistics. Verification letters of divorce are available for divorces that occurred from 1968 to present. Verification letters are not considered legal substitutes for divorce decrees. Vital Statistics strongly recommends that applicants ensure a verification will satisfy its intended use.

**A verification is a letter verifying whether or not a marriage or divorce was recorded with the State of Texas. *Please note that these verification letters are not certified and are not intended to be a certification of marriage or divorce.* To order a certified copy of the marriage license, you must contact the County Clerk’s Office in the county in which the marriage license was obtained. To order a copy of a divorce decree, you must contact the District Clerk’s Office in the District in which the divorce was filed.**

**Marriage Application** - A photocopy of a marriage application may be issued as recorded with the State of Texas based on the application for marriage sent to our office by the county or district clerk. Marriage applications will have confidential information redacted.

**Heirloom Wedding Anniversary Certificate** - This certificate may be customized to recognize a couple's wedding anniversary. This parchment-like certificate is suitable for framing for commemorative purposes only. It bears the signatures of the Governor of Texas and Texas State Registrar and is 11 inches by 14 inches in size. This is not a legal certificate of marriage. It does not establish and may not be used to establish a marriage relationship.

**The applicant must include a photocopy of his or her valid photo ID issued by a governmental entity. See Section 181.28 of the Texas Administrative Code for a complete list of acceptable forms of identification. You also can see VSS’s page on acceptable identification in English (<http://www.dshs.texas.gov/vs/reqproc/Acceptable-IDs/>) and Spanish ([http://www.dshs.texas.gov/vs/reqproc/Acceptable-IDs-\(Spanish\)/](http://www.dshs.texas.gov/vs/reqproc/Acceptable-IDs-(Spanish)/)).**

**If a record is not on file, our office will issue a “not found” letter.**

### Customer Checklist

- Complete steps 1, 2, and 3 of the application. Please type or print clearly.
- Sign and date the application.
- Make sure the application is original and not a photocopy and there are no cross-outs or white-out.
- Enclose a copy of a current driver's license, passport or state identification. See complete ID list on our website.
- Enclose appropriate fees. **Make checks or money orders payable to DSHS - Vital Statistics.**

**For more information, go to: <https://www.dshs.texas.gov/vs/requirements.aspx>.**

For the status of your request, contact VSS by telephone at 1-888-963-7111 or online at: <https://www.dshs.texas.gov/orderstatus/>.