

# Request for Marriage Certificate

(For marriages which took place in Ontario only)

(THIS SPACE RESERVED FOR OFFICE USE ONLY)

**If you have any questions, please contact the**  
 Office of the Registrar General  
 189 Red River Road  
 PO Box 4600  
 Thunder Bay ON P7B 6L8  
 Telephone: 1-800-461-2156 (outside of Toronto)  
               416-325-8305 (in Toronto)  
               416-325-3408 (TTY/Teletypewriter)  
 Fax: 807-343-7459

*Please PRINT clearly in blue or black ink.*

*In the context of this form, the word “Applicant” refers to the person completing this Request.*

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### Applicant Name

First Name	Last Name
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### Mailing Address

Organization / Firm (if applicable) \_\_\_\_\_

Street No.	Street Name	Apt. No.	Buzzer No.	PO Box
City		Province		
Country	Postal Code	Telephone Number (including area code)		Ext.

## 1. What information are you requesting and how much will it cost?

- Marriage Certificate (File Size) *NOTE: Section 4a must be completed***  
 This contains basic information, such as names, date and place of marriage.  

\$15.00 each
Quantity 
\$
- Certified Copy of Statement of Marriage (Long form) *NOTE: Section 4b must be completed***  
 This contains all information registered on the statement of marriage including signatures.  

\$22.00 each
Quantity 
\$
- Search**  
 A search results in a letter that either confirms the marriage registration exists or that there is no registration (see Instruction #4). If you don't know the exact date of the marriage event, choose a year based on information you may have obtained for this purpose, and write it in the space provided for the date. We will search that whole year plus two years before and after, for a total of five years. You may also request a search of additional years, in increments of five years.  
  
 Range of years searched \_\_\_\_\_ to \_\_\_\_\_      Each 5 years searched .....\$15.00      \$

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The Office of the Registrar General holds records for marriages that happened in Ontario during the past 80 years.

**To obtain older records, contact:**

Archives of Ontario  
 134 Ian Macdonald Boulevard  
 Toronto ON M7A 2C5  
 1-800-668-9933  
 416-327-1600

## 2. Details of Brides/Grooms

<b>Name of Bride/Groom</b>	Last name before marriage	First Name	Middle Name
Any other last name used	Place of Birth (Province/Country)		
<b>Name of Bride/Groom</b>	Last name before marriage	First Name	Middle Name
Any other last name used	Place of Birth (Province/Country)		

## 3. Details of Event

Date of Marriage Year   Month   Day	OR, If date unknown, range of years to search         TO	Place of Marriage (City, Town or Village)
Is either bride/groom deceased? <input type="checkbox"/> YES <input type="checkbox"/> NO		

## 4. Details of the Applicant (Please indicate to which category of entitled individuals the applicant belongs)

### 4a. Applicants for a Marriage Certificate (File Size):

I am: <input type="checkbox"/> bride/groom <input type="checkbox"/> parent of either bride/groom <input type="checkbox"/> child of the marriage	
Only the individuals above are entitled to apply for a Marriage Certificate (File Size). If either or both bride(s)/groom(s) are deceased, the following additional Next of Kin (see Instruction #1) are entitled to apply for a Marriage Certificate (File Size): My relationship is: <input type="checkbox"/> sibling of either bride/groom <input type="checkbox"/> If either bride(s)/groom(s) is deceased, and the Next of Kin are also deceased, the Extended Next of Kin (see Instruction #1) may apply. Please indicate the applicant's relationship to either bride/groom _____	<i>In the case that the applicant is the Next of Kin or the Extended Next of Kin, please complete the following certification:</i>  I, _____ (name, please print), am the _____ of _____. I certify that I am the Next of Kin, or the Next of Kin are deceased, and I am the Extended Next of Kin.
<input type="checkbox"/> Authorized Representative of any entitled individual (see Instruction #2). Proof of authorization is required and must be attached to this application (see Instruction #3)	

### 4b. Applicants for a Certified Statement of Marriage (Long Form):

I am: <input type="checkbox"/> bride/groom. Only bride(s)/groom(s) are entitled to apply	
If either or both bride(s)/groom(s) are deceased, the Next of Kin are entitled to apply (see Instruction #1). My relationship is: <input type="checkbox"/> parent of either bride/groom marriage <input type="checkbox"/> child of the marriage <input type="checkbox"/> sibling of either bride/groom <input type="checkbox"/> either or both the bride(s)/groom(s) is deceased, and the Next of Kin are also deceased, the Extended Next of Kin (see Instruction #1) may apply. Please indicate the applicant's relationship to the bride/groom _____	<i>In the case that the applicant is the Next of Kin or the Extended Next of Kin, please complete the following certification:</i>  I, _____ (name, please print), am the _____ of _____. I certify that I am the Next of Kin, or all the Next of Kin are deceased, and I am the Extended Next of Kin.
<input type="checkbox"/> Authorized Representative of any entitled individual (see Instruction #2). Proof of authorization is required and must be attached to this application (see Instruction #3)	

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**5. Why are You Requesting this Information? (Select One)**

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- |  |                                      |  |
|--|--------------------------------------|--|
| <input type="checkbox"/> pension benefits  | <input type="checkbox"/> insurance   | <input type="checkbox"/> divorce               |
| <input type="checkbox"/> estate settlement | <input type="checkbox"/> immigration | <input type="checkbox"/> other (specify) _____ |

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*I authorize the Office of the Registrar General to issue the requested document/information, and consent to the Ministry of Government Services collecting information about myself and the person(s) named on the record (if other than myself) from such other sources as may be necessary to verify the information on this form and my entitlement to the service required, and the disclosure of such information to the Ministry of Government Services. I am aware that it is an offence to wilfully make a false statement on this form.*

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<b>Signature of Applicant</b>	Daytime Telephone Number (including area code)	Date Signed		
		Ext.	Year	Month

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**Instructions**

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**Instruction #1**

For the purposes of entitlement to a Marriage Certificate (File Size), Next of Kin to the Bride/Groom include: Parents of either the Bride/Groom and Children of the marriage. If either (or both) of the Bride/Groom is deceased, Sibling(s) are entitled. Extended Next of Kin (closest surviving relative) to the Bride/Groom include: Grandmother, Grandfather, Aunt, Uncle, First Cousin, Niece, Nephew, or Grandchild.

For the purpose of entitlement to a Certified Copy of Statement of Marriage (Long Form), Next of Kin to the Bride/Groom include: Parents of either the Bride/Groom, Children of the marriage, Sibling(s) of the Bride/Groom. Extended Next of Kin (closest surviving relative) to the Bride/Groom include: Grandmother, Grandfather, Aunt, Uncle, First Cousin, Niece, Nephew, or Grandchild.

**Instruction #2**

Authorized Representative includes an estate trustee, an executor or administrator, a person with power of attorney or a person with legal guardianship acting on behalf of the deceased or an entitled individual.

**Instruction #3**

Proof of Authorization includes a certificate of appointment of estate trustee, letters of administration, an order under the *Declarations of Death Act, 2002*, a will, proof of power of attorney and proof of legal guardianship.

**Instruction #4**

A search may be requested by an individual getting married in another jurisdiction to demonstrate that he/she has not been married in Ontario (sometimes referred to as a letter of non-impediment).

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<b>Mail the Completed Request to:</b> <b>The Office of the Registrar General</b> 189 Red River Road PO Box 4600 Thunder Bay ON P7B 6L8 Fax: 807-343-7459	<b>If you require faster service than 6-8 weeks, please apply online at <a href="http://www.ServiceOntario.ca">www.ServiceOntario.ca</a></b>
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Personal information contained on this form is collected under the authority of the *Vital Statistics Act*, R.S.O. 1990, c.V.4 and will be used to provide certified copies, extracts, certificates, or search notices and to verify the information provided and your entitlement to the service requested and for security and law enforcement purposes. It is an offence to wilfully make a false statement on this form. Questions about this collection should be directed to: The Deputy Registrar General, Office of the Registrar General, 189 Red River Road, PO Box 4600, Thunder Bay ON P7B 6L8. Telephone outside Toronto 1-800-461-2156 or in Toronto 416-325-8305, TTY/Teletypewriter (for the hearing impaired) 416-325-3408 or Fax: 807-343-7459.

# Payment Method and Credit Card Authorization

## Applicant's Information

Applicant's First Name	Applicant's Last Name
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## Persons Named on the Marriage Certificate

Name of Bride/Groom	Last name before marriage	First Name	Middle Name

- If you're sending your payment from anywhere other than Canada, you must pay with an international money order in Canadian funds drawn on a Canadian clearing house, or by VISA, MasterCard.
- We will not accept post-dated cheques. An administration fee of \$35.00 will be applied to any cheques returned by a Financial Institution.
- We **DO NOT** accept cash as payment for any type of application.
- Please note that fees are subject to change without notice. You may send your request by mail, and pay by cheque or money order, made payable to Minister of Finance, or by VISA, MasterCard.

## Your Payment Options

Cheque or Money Order. Please make payable to: "Minister of Finance".

Credit card payment. Please complete Credit Card Information below. ▼  
You must pay by credit card if you are faxing your request to us.  
Our fax number is: **807-343-7459**.

## Credit Card Information

Print Name of Cardholder (as it appears on the credit card)	Name of Credit Card Company <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard
Signature of Cardholder X	Date Year    Month    Day
Credit Card Number (print clearly)	Expiration Date MM    YY