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Republic of the Philippines
Province of Cavite
CITY OF IMUS

CITY CIVIL REGISTRAR'S OFFICE

MARRIAGE CERTIFICATE - Application Form

Please PRINT letters in the spaces provided, Please CHECK ( ) appropriate box(es).

Number of Copies ? One Two Others (Specify) :_____

☐ ☐ **Date Request:** _____

NAME OF HUSBAND

Last Name

First Name

Middle Name

Husband's Tax Identification No. (TIN) (if known) ___ - ___ - ___

MAIDEN NAME OF WIFE

Last Name

First Name

Middle Name

Wife's Tax Identification No. (TIN) (if known) ___ - ___ - ___

DATE MARRIAGE MONTH DAY YEAR

PLACE OF MARRIAGE City / Municipality

Province

Please specify country if born abroad only: Country

REGISTERED LATE?

Check ( ) appropriate box No Yes When : _____

Requester's Tax Identification No. (TIN) (if known) ☐ ☐ ___ - ___ - ___

PLEASE TURN TO BACK PAGE

FOR NSO USE ONLY (TRANSACTION NUMBER:)

Applicant Name : _____

Tel. No. or Cellpone No. : _____

Address : _____

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