

GOBIERNO DE PUERTO RICO

Departamento de Salud

GOVERMENT OF PUERTO RICO DEPARTMENT OF HEALTH DEMOGRAPHIC REGISTRY

APPLICATION FOR MARRIAGE RECORD FOR LICENSES ISUED IN PUERTO RICO

M RD 225

	STRANT INFORMATION		Revised 05/ 2017
1.Name of Spouse :			
Last Name	Maiden Name	First Name	Middle Name
1.Name of Spouse:			
Last Name	Maiden Name	First Name	Middle Name
			Wilddie Name
2.Date of Marriage: (mr	n/dd/yyyy)	3.Place of Marriage:(TOWN)	
6.Purpose:		7.Nu	mber of Copies
PART II: APPL	ICANT INFORMATION		2.Relationship to Registrants: (PART I)
1.Full Name.			2. Relationship to Registrants. (PART I)
Last Name	First Name	Middle Name	
3.Mailing Address: (Add	dress where you will receive the document)	4.Contact Information:	
Address 1:		# Telephone:	
Address 2:	City State Zip Code	Email:	
5. Forms of Identification included:		6.Applicant's Signature:	
☐ Driver's License	□ Passport		
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☐ State ID	Other:	7. Date	

IMPORTANT:

- Cost of Certifications: \$10.00 for each certification plus a \$2.00 service charge (per certification).
- Applicants over 60 years of age residing in Puerto Rico: will receive one (1) copy of the certification free of cost, additional certifications are \$10.00 plus a \$2.00 service charge per copy
- Applicants over 60 years of age NOT residing in Puerto Rico: \$10.00 for each certification plus a \$2.00 service charge per copy.
- Veterans residing in Puerto Rico will receive one (1) certification free of cost: additional certifications \$10.00 plus a \$2.00 service charge per copy. Please include Form DD-214.
- Veterans NOT residing in P.R \$10.00 for each certification plus a \$2.00 service charge per copy. (Circular letter number OPVELA-2015-02).
- The applicant must send the exact amount of money to cover the cost of the certification and service charges. Every request requires a search in the data and record system. Fees are non-refundable.
- Accepted payment methods: ONLY MONEY ORDER, on behalf of the SECRETARY OF TREASURE; DO NOT SEND personal checks or cash.
- Acceptable forms of identification: Driver's license, Passport or State Identification Card; Copies must be current, clear and legible. Please include a copy of both sides of the identification.
- If you use a married last name in your Identification, please provide a copy of your marriage certificate, to confirm the maiden name according to how your name appears on the birth record.
- For validate kinship a son of the registrant must send copy of his or her certification of birth if not born in Puerto Rico.
- Applicants must be directly related to the registrant, according to the Law 24 of 1931, Law of the Demographic Registry; mother or father, sons, legal guardian (by means of judicial order) or legal representative.
- Please send pre-addressed envelope stamped envelope.
- Return shipping via REGULAR mail ONLY.

SHIPPING INSTRUCTIONS

Postal Address:

Registro Demográfico PO Box 11854 Fernández Juncos Station San Juan, Puerto Rico 00910