

# AIKEN COUNTY PROBATE COURT

(803) 642-2002  
(803) 642-2007 FAX

PROBATE COURT USE ONLY

FILED: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

## INFORMATION REQUIRED FOR OBTAINING A MARRIAGE LICENSE IN SOUTH CAROLINA

Marriage Licenses are issued by the Probate Courts in South Carolina after a MANDATORY 24 hours waiting period (required by law) from the time of filing the application with the Court.

Applicants must be 18 years of age to apply without a parent's consent.

### IDENTIFICATION IS REQUIRED!!!

A copy of an applicant's driver's license, military identification card, certified copy of birth certificate, or passport. DO NOT send original proof of identification.

Blood tests are NOT required in the state of South Carolina.

The application fee for a marriage license is \$45.00 and **must be paid by cashier's/certified check or money order made payable to Aiken County Probate Court.** **WE DO NOT ACCEPT CHECKS!**

### THIS LICENSE IS TO BE USED IN SOUTH CAROLINA ONLY

**APPLICANT A:** \_\_\_\_\_  
First Middle (as on birth certificate) Last Jr/Sr/II/III, etc.

Last name on birth certificate (if different from above) \_\_\_\_\_

Birth Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Race: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street/Military Base) City State Zip Code

Is this your first marriage? \_\_\_\_\_ If not, what number? \_\_\_\_\_

Telephone # ( \_\_\_\_\_ ) \_\_\_\_\_ Local Tel. # \_\_\_\_\_  
(non-Aiken County residents)

**APPLICANT B:** \_\_\_\_\_  
First Middle (as on birth certificate) Last Jr/Sr/II/III, etc.

Last name on birth certificate (if different from above) \_\_\_\_\_

Birth Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Race: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street/Military Base) City State Zip Code

Is this your first marriage? \_\_\_\_\_ If not, what number? \_\_\_\_\_

Telephone # ( \_\_\_\_\_ ) \_\_\_\_\_ Local Tel. # \_\_\_\_\_  
(non-Aiken County residents)

**SIGNATURE (1):** \_\_\_\_\_ **SIGNATURE (2):** \_\_\_\_\_

Sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public for South Carolina  
My Commission Expires: \_\_\_\_\_