



# Diocese of Colorado Springs

228 North Cascade Avenue

Colorado Springs, Colorado 80903-1498

Telephone 719/636-2345 - FAX 719/866-6474 (*Tribunal Only*)

## LACK OF FORM

### PETITION FOR DECLARATION OF NULLITY

The following CERTIFIED documents must be included with this Petition (more detailed instructions regarding these documents may be found under the "Information/Forms/Procedures" heading on the Tribunal web site at "www.diocs.org/CPC/Tribunal/index.cfm" in the "Document Summary" file).

1) Baptismal Certificate(s) (with all notations – must be new WITHIN THE LAST SIX MONTHS)

**From marriage in question (marriage to be annulled):**

2) Marriage Certificate (may be original or new civil or religious)

3) Civil Annulment/Divorce Decree (new or original - see "Document Summary" as described above)

**From previous marriage(s) - (marriage(s) prior to the marriage to be annulled):**

4) Documents from any other previous Marriage/Divorce/Annulment as required

**NOTE:**

A certified document is one issued by the court/church with their seal and the origination date. Copies of these certified documents made in your local parish and certified with the church's seal will also be acceptable. **However**, the originals must still meet the six month requirement, if applicable.

IN ADDITION, there is a **\$40.00 processing fee** which **MUST BE** submitted with this form.

Please print or type all information. Please provide maiden name and current surname for women.

\_\_\_\_\_  
Full Name of Petitioner                      Birth Date

\_\_\_\_\_  
Full Name of Respondent                      Birth Date

\_\_\_\_\_  
Street or P. O. Box

\_\_\_\_\_  
Street or P. O. Box

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Home Phone                      Work Phone

\_\_\_\_\_  
Home Phone                      Work Phone

\_\_\_\_\_  
Date of Baptism                      Name of Church

\_\_\_\_\_  
Date of Baptism                      Name of Church

\_\_\_\_\_  
Location      (city/state)

\_\_\_\_\_  
Location      (city/state)

**INFORMATION CONCERNING THE MARRIAGE TO BE DECLARED NULL:**

1. Date of Marriage: \_\_\_\_\_
2. Place of Marriage: \_\_\_\_\_
3. In the presence of \_\_\_\_\_  
(Priest, judge, minister, etc.)
4. Was this the first marriage for the Petitioner? Yes / No                      Respondent? Yes / No  
IF NOT, please provide all of the relevant information regarding who was married previously, the number of previous marriages, approximate dates of previous marriage(s), approximate dates of divorce(s). Please use a separate sheet of paper for this information.
5. Did the Catholic party(ies) to this marriage ever join another church or officially leave the Catholic Church? Yes / No                      **(If “yes”, please explain on a separate page.)**
6. Was this marriage ever convalidated in the Catholic Church by a priest or deacon? Yes / No
7. Was the Catholic party to this marriage given permission to have this marriage witnessed by someone other than a Catholic priest (minister, rabbi, judge)? Yes / No  
If so, please explain the circumstances on a separate sheet of paper.
8. Date of Divorce: \_\_\_\_\_
9. If the civil divorce proceedings for this marriage indicated that there had to be either alimony, child support, or other considerations, have these obligations been met? Yes / No / N/A  
If not, please explain the circumstances on a separate sheet of paper.

I, the undersigned, do hereby pledge and swear that the foregoing information is true and that this marriage was not valid and was never convalidated according to the laws of the Catholic Church.

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

Witnessed by:

\_\_\_\_\_  
Signature of Witness  
(Priest, Deacon, Auditor, Eccl. Notary, or Notary Public)

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Date

Seal