



DIOCESE OF COLORADO SPRINGS

228 N. CASCADE AVENUE, COLORADO SPRINGS, CO 80903

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www.diocs.org

LIGAMEN *

Diocesan Tribunal

PETITION FOR DECLARATION OF NULLITY

(* IMPEDIMENT OF PRIOR MARRIAGE, WITHOUT AN ISSUED MARRIAGE NULLITY)

*The **Petitioner** is the one who is submitting this petition for marriage nullity; **Respondent** is that person's former civil spouse for which they now seek this marriage nullity via the Ligamen process; and the **Co-respondent** is the Respondent's prior marital spouse, with which there is a civil divorce, however, no Church marriage nullity granted.

* Type/print responses, do not leave anything blank. Provide both the maiden name and current surname for women.

Full Name of **Petitioner** _____ Birth Date _____

Petitioner is the one who is submitting this petition for marriage nullity.

Street Address _____

City, State & Zip Code _____

Home or Cell Phone _____ Work Phone _____

Email Address _____

Full Name of **Respondent** _____ Birth Date _____

Respondent is that person's civil spouse

Street Address _____

City, State & Zip Code _____

Home or Cell Phone _____ Work Phone _____

Email Address _____

Full Name of **Co-respondent** _____ Birth Date _____

(Co-respondent is the Respondent's first spouse)

Street Address _____

City, State & Zip Code _____

Of these three, who are baptized Catholic?

When and on what date were they baptized?

Your Name: _____ Your Ex-Spouse's Name: _____

THE MARRIAGE DESIRED TO BE DECLARED NULL:

Date of Marriage: _____ Date of Civil Divorce: _____

Place of Marriage: _____ Place of Divorce: _____
(City, State, and Facility) (City, County, and State)

Officiated by: _____
(Name and Title)

Was this the first marriage for the Petitioner? Yes No

Have all obligations named by the civil courts been met? Yes No

If not, please explain on a separate sheet of paper.

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Petitioner's Name: _____ Respondent's Name: _____
Co-Respondent's Name: _____

THE RESPONDENT'S PRIOR MARRIAGE: (for which no Church marriage nullity has been granted)

Date of Marriage: _____ Date of Civil Divorce: _____

Place of Marriage: _____ Place of Divorce: _____
(City, State, and Facility) (City, County, and State)

Officiated by: _____
(Name and Title)

Was the Co-respondent married previously? Yes No

Was the Co-respondent alive when the Petitioner and Respondent got married? Yes No

FUTURE MARRIAGE OR CURRENT CIVIL MARRIAGE:

Future or Current Civil Spouse of Petitioner: _____

Religion: _____

Date of Marriage: _____ Was this person ever married before? Yes* No

* If the intended spouse was married before, they must contact the Diocese's Tribunal regarding the situation, so that it can be assessed.

INCLUDE THESE DOCUMENTS:

- 1) Baptismal Certificates (with notations and dated within the last six months of petition's submission) for anyone that is Catholic.
 - For baptized non-Catholics, a baptismal certificate or letter from the original church of baptism.
 - If a baptismal certificate or letter is not available, a completed and notarized Affidavit of Baptism is needed. Please contact the Diocese's Tribunal for a copy of a blank Affidavit of Baptism, if needed..

Related to the marriage you wish to be declared invalid from the beginning:

- 2) Marriage Certificate * 3) Civil Divorce Decree *
* Must be certified or notarized copies.

Related to the Respondent's first marriage:

- 4) Marriage Certificate * 5) Civil Divorce Decree *
* Must be certified or notarized copies.

Also:

- 6) Any Declaration of Nullity from the Catholic Church related to the parties.
- 7) Photocopy of Petitioner's official identification (ID, Driver's license, passport).

I, the undersigned, do hereby swear or affirm that the foregoing information is true, to the best of my knowledge and request that my marriage to the Respondent be declared null on the ground of Ligamen in accordance with the laws of the Roman Catholic Church (Canon 1085, Prior Marital Bond).

Signature of Petitioner Date

Signature of Witness Date

Printed Name of Witness
(Priest, Deacon, or Notary Public)

Seal