

# **Diocese of Birmingham in Alabama**

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### **PETITION FOR LIGAMEN**

(Please <u>print legibly or type</u> the following information)

(Petitioner)	(Respondent	<u>t</u> )	(Co-Respondent/F)	irst Spouse)
I,	, pet	ition the Tribunal o	f the Diocese of Birmi	ngham in Alabama for
declaration of the nullity of	my marriage to the Respo	ondent,		, on the
ground of the diriment impe	ediment of Ligamen. In c	onnection with this	Petition, I submit the f	following statement.
SECTION I: GENERAI	LINFORMATION			
	A. Infor	nation on the Pe	titioner	
Full Legal Name:				
First	Middle	Last	Maiden	
Current Address:				
Street		City	State	Zip
Telephone:	(home) _			_(cell)
Date of Birth: Month	Day	Year		
Age at time of Marriage to	the Respondent:			
Name and Address of Chu	arch of Baptism:			
Religion of Baptism:		_		
Date of Baptism: Month _	Day	Yea	ar	
Present Religion:		_		

P. 11.4	B. Info	ormation on the	Responden	t	
Full Legal Name:					
First	Middle	Last	Maio	len	
Current Address:					
Street		Cit	у	State	Zip
Telephone:	(hom	e)			(cell)
Date of Birth: Month	Day_	Y	ear		
Age at time of Marriage to the	he Petitioner:A	ge at the time of M	arriage to th	e Co-Resp:	
Name and Address of Chu	ırch of Baptism:				
Religion:					
Date of Baptism: Month _	Day		Year		_
Present Religion:					
Full Legal Name:	C. Information	on the Co-Resp	ondent (fir	st spouse)	
First	Middle	Last	Maio	1	
	Middle	Last	Maic	1611	
Current Address: Street		Cit	y	State	Zip
Telephone:	(h	ome)			
Date of Birth: Month					
Age at time of Marriage to					-
Name and Address of Chu	irch of Baptism:				
Religion:					
Date of Baptism: Month _			Year		_
Present Religion:					
11000111 11011510111.					

D.	<b>Concerning First Man</b>	rriage: RESPO	ONDENT TO THE CO-F	RESPONDENT
Marriage of Responde	ent to the Co-Respond	ent		
Date of Marriage: Mor	nthDay _		_Year	-
Type of Ceremony:	□ Protestant (Baptist,	Methodist, etc.)	□ Eastern Orthodox	□ Eastern Catholic
☐ Civil/Justice of the P	eace	olic 🗆 Non-G	Christian/Other	
Name of Church or Pla	ce of Marriage			
. 11				
Address: Street		City	State Zip	
Number of Children: _				
Civil Divorce: Month	Day		_Year	_
County	State			
E	. Concerning Second	Marriage: PE	TITIONER TO THE RE	<b>ESPONDENT</b>
Marriage of Petitione	r to the Respondent			
Date of Marriage: Mor	nthDay _		_Year	-
Type of Ceremony:	□ Protestant (Baptist,	Methodist, etc.)	□ Eastern Orthodox	□ Eastern Catholic
☐ Civil/Justice of the P	eace	olic 🗆 Non-G	Christian/Other	
Name of Church or Pla	ce of Marriage			
Address: Street		City	State	Zip
Number of Children: _				
Civil Divorce: Month	Day		_Year	_
	State			
				r) married the Respondent?
Î	o, please indicate the do		• ,	, 1
Date of Death	•	-		
			ovide a certified copy of t	the Death Certificate
Place of Death		i ieuse pr	ovide a certified copy of t	не Беши Сенцисие.

## SECTION II. ADDITIONAL QUESTIONS TO THE PETITIONER

Previous Spouse(s):	
Name of Spouse	Date of Marriage
Place of Marriage	Name and Title of Officiant
Date of Civil Divorce	County and State of Civil Divorce
Present Name (if different)	Present Address
If deceased: Date of Death	Place of Death
Name of Spouse	Date of Marriage
Place of Marriage	Name and Title of Officiant
Date of Civil Divorce	County and State of Civil Divorce
Present Name (if different)	Present Address
If deceased: Date of Death	Place of Death
Name of Spouse	Date of Marriage
Place of Marriage	Name and Title of Officiant
Date of Civil Divorce	County and State of Civil Divorce
Present Name (if different)	Present Address
If deceased: Date of Death	Place of Death

C.	Are you aware of any other marriages of the Responde	ent besides the marriage to the Co-F	Respondent
	(First Spouse) already covered in SECTION I Letter D	(above)? Yes	No
If so, p	lease supply the following information which applies to	Previous Spouse(s) of the Respon	dent:
1	Name of Spouse		
	Name of Spouse	Date of Marriage	
	Place of Marriage	Name and Title of Officiant	
	Date of Civil Divorce	County and State of Civil Divorce	e e
	Present Name (if different)	Present Address	
	If deceased: Date of Death	Place of Death	
2	Name of Spouse	Date of Marriage	_
	Place of Marriage	Name and Title of Officiant	-
	Date of Civil Divorce	County and State of Civil Divorce	e
	Present Name (if different)	Present Address	-
	If deceased: Date of Death	Place of Death	-
D.	If you are planning another marriage (or convalidation whom you are planning to marry as well as that person about death or annulments of his/her previous spouse, your civil attempt at marriage?	's baptismal status, previous marita	l status, information
Name (	of Party		
Is that j	person baptized [ ] No [ ] Yes Where:		
Have tl	hey been previously married? [ ] No [ ] Yes		
	To Whom 1:	[ ] Living [ ] Deceased	
	To Whom 2:	[ ] Living [ ] Deceased	
Does tl	nis person have (a) case(s) that need(s) to be presented to	the Tribunal? [ ] No [ ]	Yes
Date of	f Civil Marriage:		

## SECTION III. **DOCUMENTS**

The Petitioner submits the following **original documents** in support of the above statements. (Check the following:)

<b>A.</b>	[ ] Certified copy of the Marriage License <u>APPLICATION</u> (also called <u>Marriage License Record</u> ) between myself and the Respondent. (NOTE: Certificate of Marriage may be on this form. If so, do not need a separate Certificate) <u>THIS IS A REQUIRED DOCUMENT</u> . IT SHOULD TELL US THE NUMBER OF MARRIAGES FOR BOTH PARTIES. If the marriage took place in Alabama, you may obtain this document at any Health Department. Ask for Marriage License Record. They will print it out on site.
В.	[ ] Certified copy of the <u>Decree</u> of divorce or dissolution between myself and the Respondent signed and dated by the judge (not the petition or separation agreement). If the divorce took place in Alabama, you may obtain A Divorce Certificate at any Health Department.
<b>C.</b>	[ ] Certified copy of the Marriage License <u>APPLICATION</u> (also called Marriage License Record) between the Respondent and Co-Respondent (First Spouse). (NOTE: Certificate of Marriage may be on this form. If so, do not need a separate Certificate) THIS IS A REQUIRED DOCUMENT. IT SHOULD TELL US THE NUMBER OF MARRIAGES FOR BOTH PARTIES. THE NUMBER OF MARRIAGES ON THIS FORM SHOULD BE "0" OR "FIRST" FOR BOTH PARIES IN THIS MARRIAGE.
D.	[ ] Certified copy of the decree of divorce or dissolution between Respondent and Co-Respondent signed and dated by the judge (not the petition or the separation agreement). If the divorce took place in Alabama, you may obtain A Divorce Certificate at any Health Department.
E.	[ ] Baptismal Certificate of <u>any</u> Catholic parties.
F.	[ ] FEE: \$25.00 (See Tribunal web site at <a href="http://bhmdiocese.org/fee-schedule">http://bhmdiocese.org/fee-schedule</a> for more comprehensive fee information in the event of multiple cases.)

#### SECTION IV. WITNESSES

Witnesses will be used **ONLY** if the **Respondent** and/or the **Co-Respondent** (**First Spouse**) cannot be found or will not cooperate, or **the number of marriages is not listed on the Marriage License Record. List two witnesses. Be sure the witnesses knew either or both Respondent and Co-Respondent.** 

# I PROPOSE THE FOLLOWING WITNESSES WHO HAVE INFORMATION REGARDING THE FACTS:

- Of the Non-Catholic baptism of Respondent and Co-Respondent (First Spouse);
- Of the Validity of the marriage between **Respondent** and **Co-Respondent** (First Spouse);
- That Co-Respondent (First Spouse) was alive at the time of Respondent's marriage to the Petitioner.

#### Witness 1

Full Legal Name:	First	Middle	Last
Street Address			
City		State	
Home Phone		Cell Phone	
Have you asked the	Witness to testify?	[ ] Yes [ ] No	
Witness 2			
Full Legal Name:	First	Middle	Last
Street Address			
City		State	
Home Phone		Cell Phone	
Have you asked the	Witness to testify?	[ ] Yes [ ] No	

## PETITION FOR A DECLARATION OF NULLITY OF MARRIAGE

In accordance with canons 1501-1504 of the Code of Ca	anon Law and art. 116 of <i>Dignitas Connubii</i> ,		
, Petitioner herein, with domicile in (City, State)			
hereby request that the Tribunal of the Diocese of Birmi	ingham declares invalid my marriage with		
, Respondent h	nerein, with domicile in (City, State)		
The marriage took place at (City, State)	on (date)		
I contend that this marriage was invalid because			
☐ I, the undersigned Petitioner,	☐ the Respondent		
was validly married to	·		
This previous marriage was celebrated on	, at		
I am attaching to this Petition all the pertinent document Moreover, in accordance with can. 1686 and art. 295 of to the norms of the documentary process (cans. 1688-16	Dignitas Connubii, I ask that this process be instructed according		
By my signature below, I affirm that all the answers rec Signed (City, State)	corded above are true to the best of my knowledge		
Signature of the Petitioner	Printed Name of Advocate		
	Name of Parish		
Signature of the Advocate	Parish Mailing Address		
For Tribunal use only:			
In accordance CIC can. 1676 §1, and whereas this Tribu for adjudication in the first instance. The case is to be	unal is competent by virtue of can. 1672, I hereby accept the Petitice handled through the documentary process. This Decree is to be Bond, and they are to respond within fifteen (15) days of the		
Given at the Tribunal of the Diocese of Birmingham in A	labama, on		
	 Notary		