

+ARCHDIOCESE OF MIAMI

THE METROPOLITAN TRIBUNAL
9401 Biscayne Boulevard
Miami Shores, Florida 33138-2970

PRELIMINARY FORMAL PETITION FOR ANNULMENT

PLEASE TYPE OR PRINT

PETITIONER'S FULL NAME: _____

Petitioner's Maiden Name (if a woman): _____

Language of Petitioner: (please check one) English Spanish Both Other: _____

ACTUAL STREET ADDRESS: _____

CITY/STATE/ZIP CODE: _____

DAY TELEPHONE: _____ NIGHT TELEPHONE: _____

If your mail is to be sent to a P.O. Box or other address:

Street Address or P.O. Box: _____

City/State/Zip Code: _____

RESPONDENT'S FULL NAME: _____

Respondent's Maiden Name (if a woman): _____

Language of Petitioner: (please check one) English Spanish Both Other: _____

ACTUAL STREET ADDRESS: _____

CITY/STATE/ZIP CODE: _____

DAY TELEPHONE: _____ NIGHT TELEPHONE: _____

If his or her mail is to be sent to a P.O. Box or other address:

Street Address or P.O. Box: _____

City/State/Zip Code: _____

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NOTICE REGARDING THE WHEREABOUTS OF THE RESPONDENT

The Tribunal is required to notify the Respondent of this petition. If the petitioner has no way of furnishing an address of the Respondent, **not even in care of family or friends**, please attach a report of all efforts made to locate him or her. **(Contact The Tribunal for list of suggestions on how to locate a missing Respondent.)**

THE MARRIAGE

When did the two of you first meet? _____

How long did you know each other before marriage? _____

What is the date of your marriage? _____

Where was your marriage celebrated? (Name of Church) _____

In what City and State or country? _____

Who celebrated the marriage? (Please check one): Catholic Priest Minister or Rabbi Civil Officer

Your age at time of marriage: _____

Your date of birth: _____

Your Spouse's age at time of marriage: _____

Your Spouse's date of birth: _____

Your religion at time of marriage? _____

Baptized? Yes No

Your spouse's religion at time marriage? _____

Baptized? Yes No

If either party was Catholic at marriage and the marriage took place outside of the Catholic Church and was later blessed, provide the following:

Date of the Civil Marriage: _____

City and State or Country: _____

How many children were born from this marriage? _____

Were there any temporary separations? _____ If yes, how many? _____

When did the two of you cease living together? (Approximate date) _____

What is the date that the divorce became final? _____

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Where was the divorce obtained? _____
(Court) (City and State)

Was this the first marriage for you? Yes No

Was this the only marriage for you? Yes No

Please list all other marriages which you entered: (Attach separate sheet if necessary) Give the date of marriage, name and religion of spouse(s), how the marriage ended. Be sure to include documents of these marriages with your petition.

Was this the first marriage for your former spouse? Yes No

Was this the only marriage for your former spouse? Yes No

Please list all other marriages which you entered: (attach separate sheet if necessary) Give the date of marriage, name and religion of spouse(s), how and date the marriage ended. Be sure to include documents of these marriages with your petition.

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THE STORY OF THE MARRIAGE:

Briefly, please explain below the problems of the marriage. These answers should be **TYPED OR PRINTED**. The following elements should be covered:

1. State any unusual factors in the background of either party.
2. Detail any problems or unusual features in the courtship and the decision to marry.
3. List the marital problems which arose and the nature of the problems.
4. Why did this marriage come to an end?

(Please feel free to submit additional pages.)

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WITNESSES:

Two witnesses are required to substantiate the facts of the case. Usually, such persons would have known at least one of the parties before the marriage. Parents and siblings are acceptable as witnesses. Please be sure that these witnesses are willing to cooperate and complete the questionnaire which the Tribunal will furnish.

1. NAME: (give title, Mr., Mrs., etc) _____

Language of Witness: (please check one) English Spanish Both Other _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

RELATIONSHIP TO PETITIONER: _____

2. NAME: (give title, MR., Mrs., etc) _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

RELATIONSHIP TO PETITIONER: _____

PROFESSIONAL CONSULTATION:

If professional persons (Counselors, Psychologists, Psychiatrists) were consulted:

NAME: (give title, Mr., Mrs., etc.) _____

Language of Witness: (please check one) English Spanish Both Other _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

REASON FOR CONSULTATION: _____

(Use separate sheet for information regarding additional professionals consulted.)

NECESSARY DOCUMENTS:

FOR A PETITION FOR ANNULMENT TO BE ACCEPTED, THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS PRELIMINARY PETITION:

- | | | |
|--|---|--------------------------|
| 1. Baptismal Certificate of the Petitioner | (If Catholic) | <input type="checkbox"/> |
| 2. Baptismal Certificate of the Respondent | (If Catholic) | <input type="checkbox"/> |
| 3. Civil Certificate of the Marriage | (If NOT PERFORMED in the Catholic Church | <input type="checkbox"/> |
| 4. Church Marriage Certificate | (If PERFORMED in the Catholic Church | <input type="checkbox"/> |
| 5. Final Decree of Divorce | (Property settlements alone NOT acceptable) | <input type="checkbox"/> |

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IF ANY DOCUMENT IS UNATTAINABLE, PLEASE EXPLAIN WHY: _____

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REASON FOR THE PETITION:

Briefly explain why you are seeking this annulment: _____

Have you re-married? Yes No

Is your future spouse free to marry? (If applicable) Yes No

Has this case been previously presented to another Catholic Church Tribunal for judgment?

Yes No

If yes, in what Tribunal? _____

CONCLUSION:

I, hereby, certify that all of the information presented in this petition is correct and true to the best of my ability. I intend to fully cooperate with the Tribunal of the Archdiocese of Miami in determining the facts of the case. I understand that no precise date can be given for a decision and that no plans can be made at this time for a new marriage in the Catholic Church.

Further, I request that the Metropolitan Tribunal of the Archdiocese of Miami investigate my former marriage to see whether an annulment may be granted.

Date

Petitioner's Signature

Date

Advocate's Signature

Parish or Agency