

METROPOLITAN TRIBUNAL ARCHDIOCESE OF HARTFORD



PETITION FOR A DECLARATION OF INVALIDITY DUE TO LACK OF CANONICAL FORM (canon 1108)

PROCEDURES FOR A DECLARATION OF INVALIDITY

1. A Petition for a declaration of invalidity is to be made when it is claimed that at least one party to a marriage is bound by the Catholic form of marriage, that the marriage in question did not take place or was not validated in the presence of a Catholic priest/deacon, and that a dispensation from form was not obtained.
2. A separate Petition is to be made for each marriage attempted by the applicant.
3. The Petition for a declaration of invalidity and the original documents indicated in the Petition are to be sent to the Tribunal by mail. Those documents will be returned. The declaration will be sent to the priest/deacon. If there is a need for further investigation, a member of the Tribunal will inform the priest/deacon of the nature of this investigation.
4. It is essential that the certificate of marriage indicate the official capacity of the person who assisted at the marriage, i.e., minister, rabbi, or civil official.
5. The priest/deacon will review the details of the marriage so that he may be assured there has been no subsequent validation or sanation.

There is no fee associated with this petition.



METROPOLITAN TRIBUNAL
 ARCHDIOCESE OF HARTFORD
 467 Bloomfield Avenue
 Bloomfield, CT 06002

**DECLARATION OF INVALIDITY
 DUE TO LACK OF CANONICAL FORM
 CANON 1108**

PETITION

(Kindly print or type answers)

_____, a _____ married
 First name Family name Religion

_____, a _____ in
 First name Family name Religion

_____, on _____
 Specify County City State Day Month Year

In the presence of a (check one) _____ minister _____ rabbi _____ civil official.

The present name and address of the person I married is: _____

Full Name

This information is especially important
 if the other party is bound to the form or
 if the priest has reasons to think that the
 marriage has been validated or sanated.

House number and street

City State Zip code

I submit that this marriage is invalid because (check one) I, myself _____ the other party _____ was
 baptized Roman Catholic prior to the wedding, never obtained a dispensation from canonical form, and never
 validated the marriage in the Catholic Church.

We were married by: _____

Name of Officiant

at _____ in _____
 Church/Venue City and State

As proof of the foregoing (**the priest must send the original certificates to the Tribunal with this Petition; they will be returned**) I enclose the following:

1. Recent certificate of Catholic baptism (showing notations/lack thereof on front and back);
2. Certificate of marriage in which the **name and title of the officiant** is given.
 This information is essential to your case. The petition will not be processed until you provide it.

I have (check one) _____ a civil divorce _____ civil annulment

The priest **must see** the civil divorce or civil annulment. This is not to be sent to the Tribunal.

I HAVE READ THIS PETITION CAREFULLY AND I SOLEMNLY SWEAR THAT THE FOREGOING STATEMENTS ARE TRUE.

Signature of Petitioner _____

Date

House number and street

City

State

Zip Code

I wish to contract marriage with _____
Full Name

House number and street City State Zip Code

The undersigned priest/deacon (check one):

Has no reason _____ has reason _____ to believe that this marriage was validated in the Catholic Church.

SEAL _____
OF _____
CHURCH _____
Name _____
Parish _____
Address _____

Phone (Parish) _____
Cell (Priest) _____

IF A DISPENSATION FROM THE CANONICAL FORM of marriage was granted prior to the wedding, this Petition can NOT be used.

IF THE MARRIAGE WAS SUBSEQUENTLY CONVALIDATED OR SANATED, this Petition can NOT be used.

Observations _____

If known, please indicate date of upcoming ceremony _____

THIS SPACE IS RESERVED FOR TRIBUNAL USE ONLY

Baptism _____
Date Place

DECLARATION OF INVALIDITY

I, the undersigned Judicial Vicar, am convinced that the proofs presented indicate that the marriage in question is invalid by reason of Lack of Canonical Form.

Name _____ Date _____