

For office use only  
File # \_\_\_\_\_  
File Date \_\_\_\_\_  
Registration Fee (\$20.00 cash): \_\_\_\_\_

Identification Presented:  
Type: \_\_\_\_\_ ; ID# \_\_\_\_\_  
Type: \_\_\_\_\_ ; ID# \_\_\_\_\_

# REGISTRATION OF DOMESTIC PARTNERSHIP AFFIDAVIT

[City of Urbana, Illinois]

**WE DO HEREBY CERTIFY OURSELVES TO BE DOMESTIC PARTNERS AS DEFINED BY THE CITY OF URBANA DOMESTIC PARTNER REGISTRY ORDINANCE. WE FURTHER DECLARE:**

- We are engaged in a committed relationship and intend to remain together indefinitely.
- We are at least 18 years of age and have the capacity to enter into a contract.
- We share a common permanent residence and are jointly responsible to each other for the necessities of life.
- We are not related by blood closer than permitted for married couples under Illinois marriage laws.
- Neither of us has another domestic partner.
- Neither of us is legally married.
- Neither of us may lawfully be claimed as a dependant on any other person's federal income tax return.
- We understand that the registration of this Domestic Partnership Affidavit creates a domestic partnership of continuous duration until either of us files an Affidavit of Termination or upon the death of either of us.
- Each of us agrees to file jointly or separately an Affidavit of Termination with the Urbana City Clerk within 30 days of a change in this domestic partnership such that we no longer meet the criteria herein.

*WE CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.*

**Applicant's** signature \_\_\_\_\_  
(printed) (written)

Address: (street) \_\_\_\_\_ (city/state) \_\_\_\_\_ (zip) \_\_\_\_\_

Proof of Age Verified | \_\_\_\_\_ |

**Applicant's** signature \_\_\_\_\_  
(printed) (written)

Address \_\_\_\_\_ (city/state) \_\_\_\_\_ (zip) \_\_\_\_\_

Proof of Age Verified | \_\_\_\_\_ |

SUBSCRIBED and SWORN to before me by

\_\_\_\_\_ and \_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Notary Public)