

Domestic Partnership Registration

Introduction

A Domestic Partnership is a legal relationship permitted under the laws of the State of New York for couples that have a close and committed personal relationship. The Domestic Partnership Law recognizes the diversity of family configurations, including lesbian, gay, and other non-traditional couples.

Requirements

You and your partner may register to become a Domestic Partnership if you meet the following requirements:

- Both you and your partner are New York State residents and at least one of you is employed by the Village of Brockport on the date of registration.
- Both persons are 18 years of age or older.
- Neither you nor your partner is married or related by blood in a manner that would bar his or her marriage in New York State.
- Both of you have a close and committed personal relationship, live together, and have been living together on a continuous basis.
- You and your partner must be able to truthfully state an identical residential address on the application form for the Domestic Partnership.
- Neither you nor your partner is currently in another Domestic Partnership or has been registered as a member of another Domestic Partnership within the last six months

Application Procedure

- If you and your partner wish to register as Domestic Partners, you will need to pick up the affidavit from the Village Clerk.
- You both must appear in person at the Village Office, 49 State St., Brockport, New York with an [acceptable form of identification](#).
- As part of the completion process, the Domestic Partnership affidavit must be signed by both partners and notarized. Notarization is available without charge in the Village Clerk's Office.

(Over)

Identification

Acceptable forms of identification for the Domestic Partnership application are:

- Valid driver license or non-driver identification card issued by the Department of Motor Vehicles (from the United States or any of its territories)
- Original Birth Certificate
- Passport
- Official School Record
- United States Permanent Resident Card
- Employee Identification Card

Proof of Domestic Partnership

- Please provide at least two (2) of the following:
- New York State Drivers License for each individual
- Copy of Utility Bills that includes each individuals name on bill
- Copy of signed lease or house title that includes each individual's name
- Copy of signature page of most recently filed income tax return(s) that includes each individual's signature.

Termination of Domestic Partnership

- You or your partner may terminate your Domestic Partnership by filing a Declaration of Termination of Domestic Partnership in person at the Village Clerk's Office.
- If either you or your Domestic Partner gets married to each other or to another person, your Domestic Partnership is automatically terminated.

State of New York
County of Monroe

Declaration of Domestic Partnership

We declare under penalty of perjury:

1. I, _____, and _____
Currently live together, and have lived together continuously for at least six (6) months immediately prior to filing this statement.
2. We are both eighteen (18) years of age or older and are competent to enter into a contract.
3. Neither of us are married.
4. We intend to continue to live together and are committed to the physical, emotional and financial care and support of each other.
5. We share with each the common necessities and tasks of one household and are financially interdependent.
6. We are each other's domestic partner, that each has no other domestic partner and that we intend to remain each other's sole domestic partner.
7. Neither of us has terminated a Statement of Domestic Partnership or its equivalent in any jurisdiction within six (6) months immediately prior to filing the statement.

We declare under penalty of perjury under the laws of the State of New York that the statements above are true and correct.

Executed on _____ at Village Hall, 49 State St. Brockport, New York
Date

Employee Name:

Print _____
Address First Middle Last
House or Apt. # Street
City State Zip

Date of Birth _____ Signature _____

Sworn to before me this day of _____, _____ Village Clerk, Brockport, New York

Domestic Partner:

Print _____
Address First Middle Last
House or Apt. # Street
City State Zip

Date of Birth _____ Signature _____

Sworn to before me this day of _____, _____ Village Clerk, Brockport, New York

State of New York
County of Monroe

Declaration of Termination of Domestic Partnership

I declare under penalty of perjury:

1. I, _____ hereby advise the Village of Brockport that the domestic partnership declaration previously filed with the Village Clerk, is hereby dissolved.
2. I also declare that I have notified the other domestic partner _____ of the termination in writing. A copy of said notification must be included with this application.
3. I also declare that said notice of the termination has been received by the other domestic partner at least thirty (30) days immediately prior to the termination of the domestic partnership.

Employee Name:

Print First Middle Last
Address

House or Apt. # Street

City State Zip

Date of Birth _____ Signature _____

Sworn to before me this day of _____, _____ Village Clerk, Brockport, New York

State of New York
County of Monroe

Declaration of Termination of Domestic Partnership

I declare under penalty of perjury:

1. I, _____ hereby advise the Village of Brockport that the domestic partnership declaration previously filed with the Village Clerk, is hereby dissolved.
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3. I also declare that said notice of the termination has been received by the other domestic partner at least thirty (30) days immediately prior to the termination of the domestic partnership.

Employee Name:

Print First Middle Last
Address
House or Apt. # Street

City State Zip

Date of Birth _____ Signature _____

Sworn to before me this day of _____, _____ Village Clerk, Brockport, New York

