



# Domestic Partnership Registration Application

City of Richfield | 6700 Portland Avenue S | Richfield, MN 55423 | 612-861-9700 | [www.richfieldmn.gov](http://www.richfieldmn.gov)

**Application Fee: \$30 Please make checks payable to the City of Richfield**

We affirm that we meet all of the following definitions of Domestic Partners pursuant to Section 120.03 Subd. 2 of the Richfield City Code and are eligible for registration:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>) Are not related by blood closer than permitted under marriage laws of the state</li> <li>) Are committed to one another to the same extent as married persons are to each other, except for the traditional marital status and solemnities</li> <li>) Are not married under the laws of this state</li> <li>) Do not have any other domestic partner(s)</li> </ul> | <ul style="list-style-type: none"> <li>) Are competent to enter into a contract</li> <li>) Are both at least 18 years of age</li> <li>) Are jointly responsible to each other for the necessities of life</li> <li>) At least one of whom resides in Richfield or is employed in Richfield</li> </ul> |
|---|---|

Partner 1:	Last	First	M.I.
Partner 2:	Last	First	M.I.
Address:	Street Address		Apartment/Unit #
City	State		ZIP Code

**Signatures This form must be signed in front of a notary public.**

I hereby certify that the information given is complete and accurate:

Partner 1 Signature:	
Partner 2 Signature:	

**Notary Signature**

Subscribed and sworn to before me, a Notary Public, on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission expires on \_\_\_\_\_.

Seal

**Data Practices Act Notification**

THE MINNESOTA DATA PRACTICES ACT requires that we inform you of your rights about the private data we are requesting on this form. Private data is available to you, but not to the public. We are requesting this data to determine your eligibility for a license from the City of Richfield. Providing the data may disclose information that could cause your application to be denied. You are not legally required to provide the data, however, refusing to supply the data may cause your license to not be processed. Under MS 270.72, the City of Richfield is required to provide the Minnesota Department of Revenue your MN Tax ID Number or Social Security Number. This information may be used to deny the issuance, renewal or transfer of your license if you owe the Minnesota Department of Revenue delinquent taxes, penalties, or interest. The Department of Revenue may supply information to the Internal Revenue Service. In addition, this data can be shared by Richfield City Staff, the State of Minnesota Driver License Section, Hennepin County Auditor, Bureau of Criminal Apprehension, Hennepin County Warrant Office, and Ramsey County Warrant Office. Your signature on this application indicates you understand these rights. Your residence address and telephone number will be considered public data unless you request this information to be private and provide an alternative address and telephone number. **Please sign below to indicate you have read this notice.**

<b>Signature</b>	<b>Signature</b>
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**I request that my residence address and telephone number be considered private data. My alternative address and telephone number are as follows:**

**Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

OFFICE USE ONLY
Date Received _____
Effective Date _____