

Diocese of Palm Beach - Tribunal
9995 North Military Trail
P.O. Box 109650
Palm Beach Gardens, Florida 33410-9650

Telephone: (561) 775-9535
Fax: (561) 799-5981

Tribunal of the Diocese of Palm Beach

Protocol No: _____

Mandate of Procurator-Advocate

I, the undersigned Petitioner, hereby name and constitute:

(Name of Procurator-Advocate)

as my Procurator and Advocate in the matrimonial case of nullity before the Tribunal of the Diocese of Palm Beach, with the authority to place all acts which may be either necessary or useful before the Tribunal.

***N.B.* Acceptance of this petition does not guarantee a favorable decision. No marriage or convalidation plans are to be made prior to a formal declaration of nullity. Any dates arranged for a new marriage in the Catholic Church prior to submitting this petition cannot be honored by the Tribunal.**

(Signature of Petitioner)

Date: _____

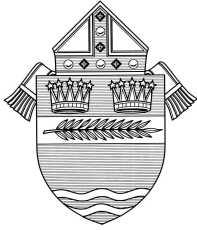
Place: _____

I hereby accept my appointment as Procurator-Advocate for the above named party.

(Signature of Procurator-Advocate)

Date: _____

Place: _____



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Tribunal of the Diocese of Palm Beach

Protocol No: _____

Preliminary Petition of Inquiry

Petitioner Information

Petitioner's Name (*Maiden, if woman*): _____

Present Legal Last Name (*Mr., Ms., Mrs., or Dr.*): _____

Actual Street Address: _____

City / State / Zip Code: _____

*(If mail is to be sent to a **Post Office Box** or **alternate address**, please supply the following:)*

P.O. Box or alternate address: _____

City / State / Zip Code: _____

Telephone: (*work*): _____ (*home*): _____ Occupation: _____

Religion at time of marriage: _____

Date of Birth: _____ Baptized? Yes No Date of baptism: _____

If baptized a Catholic, name and address of Church of baptism: _____

Reason for this Petition

Briefly, explain why you are seeking this Declaration of Nullity (e.g., to enter a new marriage, to validate an existing one, spiritual needs, etc.)

Has this case been presented previously to another Tribunal? Yes No

Diocese of _____ Protocol Number: _____

Have you informed your former spouse of this petition? Yes No

Respondent Information (former spouse)

Please understand that the Code of Canon Law requires you to provide the address of the Respondent, if this is at all possible. Tribunal personnel, not you, will contact and seek the Respondent's cooperation.

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

Present Legal Last Name (Mr., Ms., Mrs., or Dr.): _____

Actual Street Address: _____

City / State / Zip Code: _____

*(If mail is to be sent to a **Post Office Box** or **alternate address**, please supply the following:)*

P.O. Box or alternate address: _____

City / State / Zip Code: _____

Telephone: (work): _____ (home): _____ Occupation: _____

Because the Tribunal is required by the Code of Canon Law to notify the Respondent of this petition, and if his/her address is unknown, please provide the names and addresses of close relatives, friends, lawyers, or others who may be able to forward information to the Respondent.

1. Name: _____

Relationship to Respondent: _____

Address: _____

City / State / Zip Code: _____

2. Name: _____

Relationship to Respondent: _____

Address: _____

City / State / Zip Code: _____

Respondent's date of birth: _____

City / State: _____

Religion at time of marriage: _____

Baptized? Yes No Date of baptism: _____

If baptized a Catholic, name and address of Church of baptism: _____

Courtship Information

Date you first met: _____ Length of dating period *(with an intent to marry)*: _____

Formal engagement? Yes No Length: _____

Marriage Ceremony Information

Marriage ceremony in the Catholic Church

_____ (Date of Marriage in the Catholic Church) _____ (Church of Marriage) _____ (City / State)

Age at the time of the marriage: Petitioner: _____ Respondent: _____

(Note: If either party was Catholic at the time of marriage, but the marriage took place outside the Catholic Church and was later convalidated [blessed] in the Church by a priest/deacon, or authorized minister, please include the following information pertaining to the civil marriage:)

_____ (Date of Civil Marriage) _____ (Place of Civil Marriage) _____ (City / State)

Officiant: Minister / Rabbi Civil Official / Magistrate

(If applicable, age at the time of the civil marriage: Petitioner: _____ Respondent: _____)

Marriage ceremony between Non-Catholics

_____ (Date) _____ (Place) _____ (City / State)

Officiant: Minister / Rabbi Civil Official / Magistrate

Age at the time of the marriage: Petitioner: _____ Respondent: _____

Other Marriage Information

Number of children born of this marriage: _____

Dates of birth: _____

Separations *(work related, marital, legal, other [include number, dates, length of time])*: _____

Length of time of cohabitation *(before marriage ceremony)* _____ *(after marriage ceremony)* _____

Date of final separation: _____

Date and place of final divorce: _____

_____ (City) _____ (County) _____ (State)

Other Marriages of the Petitioner

Was the marriage to the Respondent the first marriage for you? Yes No

Was it the only marriage for you? Yes No

If no, please complete the following for each marriage, before and after this one: the date and place of each marriage, the name and religion of each spouse, how the marriage ended (i.e., death or divorce), the date the marriage ended, and whether the marriage in question was declared null by the Catholic Church. Please include pertinent documents for all marriages, before and after, with this petition.

Date Place (Church/Other) Name of Spouse Spouse's Religion Date of Divorce Declared Null by Church?

Determination of your Ability to Marry in the Catholic Church

Have you remarried? Yes No Do you intend to remarry? Yes No

The following refers to your present or intended spouse **and will affect your ability to marry in the Catholic Church:**

Name: _____

Religion: _____ Baptized: Yes No

If yes, please enclose a recent baptismal certificate (issued within last six [6] months) for your present or intended spouse.

Has he / she been married before? Yes No

If yes, please give details of any previous marriage(s):

Date Place (Church/Other) Name of Spouse Spouse's Religion Date of Divorce Declared Null by Church?

Other Marriages of the Respondent (former spouse)

Was the marriage to you the first for your former spouse? Yes No

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

If no, please complete the following for each marriage, before his/her marriage to you and after this one: the date and place of each marriage, the name and religion of each spouse, how the marriage ended (i.e., death or divorce), the date the marriage ended, and whether the marriage in question was declared null by the Catholic Church. Please include any documents available for all marriage of the Respondent before the Respondent's marriage to you, if at all possible.

Date Place (Church/Other) Name of Spouse Spouse's Religion Date of Divorce Declared Null by Church?

Witnesses

*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. These may include parents, siblings, other relatives, or friends. **Please be sure that the individuals you present as witnesses are willing to cooperate and complete the questionnaire that the Tribunal will provide.***

- 1. Name (Mr., Ms., Mrs., or Dr.): _____
Address: _____
City / State / Zip Code: _____
Relationship to Petitioner: _____

- 2. Name (Mr., Ms., Mrs., or Dr.): _____
Address: _____
City / State / Zip Code: _____
Relationship to Petitioner: _____

- 3. Name (Mr., Ms., Mrs., or Dr.): _____
Address: _____
City / State / Zip Code: _____
Relationship to Petitioner: _____

Professional Consultation

If professional persons (e.g., clergy, counselors, medical doctors, psychologists, or psychiatrists) were consulted, please provide the following:

- 1. Name (please include title): _____
Address: _____
City / State / Zip Code: _____
Number and approximate dates of consultation: _____

- 2. Name (please include title): _____
Address: _____
City / State / Zip Code: _____
Number and approximate dates of consultation: _____

The Story of the Marriage

Instructional Guideline for completing the narrative of *The Story of the Marriage*

*Please provide a detailed narrative of the story of your marriage.
Please type (or write legibly) and avoid one word answers. The following should be addressed:*

Problems in the background of either party

Please describe in detail any special problems or circumstances in your family of origin and in your former spouse's family of origin: divorce, absence of parents, discipline, affection, religious upbringing, abuse, death, chronic illness, trouble with the law, emotional, or mental problems requiring treatment, addictions, verbal, physical or sexual problems or abuse, financial hardship, etc.

Circumstances and problems in the courtship and the decision to marry

Describe your previous dating experiences before meeting your former spouse. Please indicate the length of time between your last serious relationship and your dating of the Respondent. Detail your introduction to your former spouse, any previous engagements or marriages (even civil marriages), and your attraction to each other, together with any problems during the courtship and their resolution. Indicate which partner was more dominant (i.e., who made decisions), as well as the type of relationship. Describe what changed in the relationship that caused you to progress from dating to making a decision to marry, and include the date and how your decision was received by family and friends, together with any cautions or advice against marriage. Additionally, note any discussions or threats to break off the relationship or hesitancy to marry, and detail the reconciliation. Detail any pre-marital pregnancy and/or prenuptial agreements, and any cohabitation before marriage. Finally, describe the driving force behind your decision to marry.

Attitudes of both parties concerning permanence, fidelity, and children (i.e., did both parties intend [not simply hope] to stay together for life, to be faithful always, and to accept children lovingly)

Detail your views and your experiences, and those of your former spouse, regarding divorce; the permanence of marriage; fidelity before and during the marriage; the desire for children and their value in marriage (or a desire to delay or exclude children, i.e., contraception, abortion, or surgical procedure).

Marital problems which arose, the nature of the problems, and whether they were evident before the marriage

Detail your understanding and your former spouse's understanding of marriage as a personal commitment and an interpersonal communion: as friendship, intimacy, and benevolence. In the light of faith, were there any issues involving fidelity, exclusivity, inability to give consent, or a lack of an understanding of marriage as a sacrament. List particular qualities that may have been expected, i.e., heterosexuality, integrity, self-sacrifice, etc.

Cause of the final breakup

Describe the number, length, and reasons for separations during the courtship and the marriage, including the cause of the final breakup.

Please give any other information that you believe would be helpful to the Tribunal in the study of your marital history.

Required Documentation

The following documents are **required** to begin the process for a Declaration of Nullity. (Please check to ensure that these documents are enclosed with this petition.)

- Baptismal certificate for each Catholic party (issued within the last six [6] months): Petitioner
Respondent
- Legally certified copy of civil marriage certificate (for *all* marriages, including Catholic marriages):
- Church marriage certificate (for Catholic marriages):
- Legally certified copy
of Final Divorce Decree (not *Decree Nisi* or a separation/settlement agreement):
- If applicable, legal document showing name change:
- Other: _____

Conclusion

It is estimated that it costs the Diocese of Palm Beach about \$2,500.00 to investigate, prepare, and decide any given petition. The major portion of this is supported through the Annual Appeal of the Diocese. **The Tribunal helps to defray the remainder of the cost by asking you, the Petitioner, for \$400.00. Please include a filing fee of \$200.00 with this petition (\$100 non-refundable).** The balance is payable in installments or at the completion of the case. If anyone requires a reduction or a total waiver, the Tribunal will readily arrange to honor such a written request and will ensure that the case will continue in a suitable manner. In this situation, the Tribunal may ask your parish for financial assistance to help defray costs. **At no time should financial considerations discourage or prevent any person from exercising the right to receive a just hearing from the Church. One's ability or inability to meet this financial obligation in no way affects the progress or outcome of a petition.**

I certify that all 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 Diocese of Palm Beach in determining the facts of the case. I understand that my testimony is given for the specific purpose of aiding the Tribunal in rendering an objective decision, and I allow only duly authorized members of the Tribunal and higher ecclesiastical courts to review my testimony for this sole purpose. I understand that I and my former spouse, near the end of the case, are permitted to review the evidence gathered, and I also will make my witnesses aware of this review.

I understand that this is a strictly religious/ecclesiastical matter, having no effect on the legitimacy of children, alimony, or other civil law matters.

I understand also that the acceptance of this petition does not guarantee a favorable decision. 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.

I now request that the Tribunal of the Diocese of Palm Beach undertake a study to determine whether, in light of the teachings of the Church, and the *Code of Canon Law*, my former marriage to the Respondent lacked one or more of the essential elements that the Church considers necessary for the relationship to be binding unto death.

(Date)

(Signature of Petitioner)

(Parish)

(Signature of Procurator / Advocate)