

THE TRIBUNAL
EPARCHY OF SAINT MARON OF BROOKLYN
300 Wyoming Avenue
Scranton, Pennsylvania 18503-1279
Tel: (570) 207-2246 - Fax: (570) 207-2274
[email: MaroniteTribunal@aol.com](mailto:MaroniteTribunal@aol.com)

PETITION

With the enclosed information, I, the undersigned Petitioner, acting pursuant to *CCEO* cc.1360, 1° and 1185 et seq., hereby request the Tribunal of the Eparchy of Saint Maron of Brooklyn to declare my marriage to the above-named Respondent null and void under the applicable provisions of ecclesiastical law.

I verily believe and therefore assert that the canonical grounds on which the marriage should be declared null are defect of consent and/or simulation of marriage.

The Tribunal is competent to adjudicate this cause pursuant to *CCEO*

c.1359. In regard to the adjudication of my petition, I understand that:

- No assurance can be given of an affirmative decision (that is, one granting the annulment) nor as to a definite time for the completion of the canonical process;
- No arrangements can be made for a future Catholic marriage or convalidation until after I have received a final and favorable decision from the Tribunal
- If the circumstances causing the invalidity of the marriage so indicate, the Tribunal may require a counseling evaluation before a marriage in the Church is permitted.
- The respondent (my former spouse) is entitled to participate in these proceedings and, thus, will be notified by the Tribunal (upon receipt of this petition) and given an opportunity to participate in the process. I am aware that his/her rights further include:
 - knowing the basis for my petition,
 - offering testimony and/or witnesses which can support of challenge it,
 - the possibility of reviewing my testimony and that of my witnesses,
 - challenging or appealing the decision of this Tribunal to that of a higher Church court.

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- Normally, it is expected that this questionnaire will provide sufficient information that will eliminate the need for an in-person interview. However, after an initial evaluation, the Tribunal may request a personal interview with me and/or my witnesses.

AFFIDAVIT OF THE PETITIONER

I solemnly affirm before God and my conscience that I present this testimony in good faith, and that the answers I have given are entirely true, to the best of my knowledge. Furthermore, I hereby consent to the possibility that the Tribunal may need to disclose my testimony to the following: the parties of the case (petitioner and respondent), clinical experts, and/or another church tribunal. This consent is also extended to other professionals who may be needed in order to arrange for a future Catholic marriage for either party.

SIGNATURE OF PETITIONER _____
(if female, include maiden name)

This affidavit should be notarized and you should sign it in the presence of a Catholic priest or deacon (at a local Catholic Church) or a Notary Public.

_____ WITNESSED ON (Date)
AT (Place)

WITNESS TO YOUR SIGNATURE (Notary)

Note to priest, deacon or notary public: for reasons of confidentiality, it is not appropriate for you to review the contents of this questionnaire.

[Seal]

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THE MARRIAGE IN QUESTION
CONCERNING YOU

Your present name:: _____

Your maiden name: _____

Your complete address _____

(Street, City, State, Zip Code);

Your daytime phone number: _____ Your home phone number: _____

Your date and place of birth: _____

Who referred you to the Tribunal? _____

Were you ever baptized? Yes () No () Year _____ Denomination _____

Your religion at the time of marriage: _____

Your present religion: _____

The church you attend: _____

CONCERNING YOUR FORMER SPOUSE

His/Her present name: _____

Her maiden name: _____

His/Her complete address: _____

His/Her daytime phone number: _____ His/Her home phone number: _____

His/Her date of birth: _____

Was he/she ever baptized? Yes () No () Year _____ Denomination: _____

His/Her religion at the time of marriage: _____

His/Her present religion: _____

The church he/she attends: _____

Will he/she cooperate in this case: Yes () No ()

CONCERNING THE MARRIAGE

Length of courtship: _____

Date of marriage: *(month, day, year)* _____

Place: *(city, state)* _____

Type of Ceremony: () Roman Catholic () Russian or Greek Orthodox () Civil
() Eastern Catholic () Other Religion

**SUBSEQUENT MARRIAGES
CONCERNING YOU**

Have you entered any marriages after the one in question? Yes () No ()

If yes, with whom? _____

Was he/she ever baptized? Yes () No ()

Denomination: _____

His/Her religion: _____

Date of marriage: (*month, day, year*) _____

Place: (*city, state*) _____

Type of Ceremony: Civil () Religious ()

Was this spouse married before? Yes () No ()

Are you still married to this spouse? Yes () No ()

If no, date of divorce: (*month, day, year*) _____

What is your present marital status? _____

CONCERNING YOUR FORMER SPOUSE

Is he/she presently remarried? Yes () No ()

If yes, is his/her present spouse Catholic? Yes () No ()