

**APPLICATION FOR  
CHANGE OF NAME (ADULT)**  
PC-901(BBS) REV. 3/98

**STATE OF CONNECTICUT  
COURT OF PROBATE**

Type or print in black ink.

**TO: COURT OF PROBATE, DISTRICT** **DISTRICT NO.** **RECORDED:**

IN RE CHANGE OF NAME OF **DATE OF APPLICATION**

**PETITIONER (Give present name and new name as requested.)**

NAME **CHANGED TO**

DATE OF BIRTH PLACE OF BIRTH

SOCIAL SECURITY NO. NAME ON BIRTH CERTIFICATE

PRESENT ADDRESS **TELEPHONE**

HOW LONG HAS PETITIONER LIVED AT ADDRESS?

NAME OF NON-PETITIONING SPOUSE, IF ANY ADDRESS OF NON-PETITIONING SPOUSE

**SPOUSE CO-PETITIONER (Give present name and new name as requested.)**

NAME **CHANGED TO**

DATE OF BIRTH PLACE OF BIRTH

SOCIAL SECURITY NO. NAME ON BIRTH CERTIFICATE

PRESENT ADDRESS **TELEPHONE**

HOW LONG HAS CO-PETITIONER LIVED AT ADDRESS?

A change of name is sought for the following reasons:

The petitioner(s) represent(s) that the purpose of seeking a change of name is not to deceive, defraud, or mislead any person or governmental agency but solely for the reason(s) stated above.

WHEREFORE, the petitioner(s) as indicated above, request(s) a change of name to the name(s) stated above.

**The representations contained herein are made under the penalties of false statement.**

PETITIONER'S SIGNATURE	DATE	CO-PETITIONER'S SIGNATURE	DATE
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