

**DOMESTIC PARTNER AFFIDAVIT**

This Domestic Partner Affidavit (“Affidavit”) is made by the undersigned parties to affirm the existence of a domestic partnership in accordance with applicable laws of the United States. The parties declare as follows:

**1. Parties:**

Partner 1 Full Name: \_\_\_\_\_  
Partner 1 Address: \_\_\_\_\_  
Partner 2 Full Name: \_\_\_\_\_  
Partner 2 Address: \_\_\_\_\_

**2. Declaration of Domestic Partnership:**

The undersigned partners declare that they are each other’s sole domestic partner and intend to remain so indefinitely. They share a committed personal relationship characterized by mutual support, caring, and shared responsibility for each other’s welfare. The partners live together in a common residence and mutually agree to be jointly responsible for basic living expenses.

**3. Eligibility:**

Each partner affirms that they are at least 18 years of age and competent to enter into this Affidavit. Neither partner is married to or in a domestic partnership with any other person. Neither partner is related to the other by blood in a manner that would prohibit legal domestic partnership.

**4. Legal Effect:**

This Affidavit is intended to provide evidence of the domestic partnership status of the parties for purposes permitted by law, including but not limited to health insurance benefits, housing, and taxation where applicable. This Affidavit shall not be construed as a marriage or civil union and does not confer any rights beyond those provided by applicable domestic partnership laws.

**5. Duration and Termination:**

The domestic partnership declared herein shall continue until terminated by either partner giving written notice to the other. Termination shall be effective upon receipt of such notice. The partners agree to notify any third parties relying on this Affidavit of termination.

**6. Affidavit and Notarization:**

The undersigned partners affirm under penalty of perjury under the laws of the United States and their respective states that the foregoing is true and correct to the best of their knowledge and belief. This Affidavit may be executed in counterparts and may be notarized or witnessed as required by applicable law.

**7. Additional Provisions:**

- a. The partners agree to update this Affidavit or execute any additional documents as reasonably required to reflect changes in their domestic partnership status.
- b. This Affidavit shall be governed by and construed in accordance with the laws of the United States and the state in which the partners reside.
- c. If any provision of this Affidavit is held to be invalid or unenforceable, the remaining provisions shall remain in full force and effect.
- d. This Affidavit constitutes the entire agreement between the partners concerning the subject matter herein and supersedes all prior agreements or understandings.

**PARTNER 1 SIGNATURE**

**PARTNER 2 SIGNATURE**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTARY ACKNOWLEDGMENT**

State of \_\_\_\_\_

County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_ (here insert name and title of the officer), personally appeared \_\_\_\_\_ and \_\_\_\_\_, personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to this instrument, and acknowledged that they executed it.

Notary Public Signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

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