

**DECLARATION OF TERMINATION OF DOMESTIC PARTNERSHIP**  
**Article III – Chapter 42 of the West Palm Beach City Code**

**Instructions:**

Complete and submit this form (notarization is required) to the City Clerk’s Office at the address above. A filing fee of \$25.00 is required and must accompany the registration form. Make check payable to the City of West Palm Beach. A copy of this executed form must be served, by certified or registered mail, on the other registered domestic partner. The termination of Domestic Partnership becomes effective on the date proof of service is filed with the City Clerk’s Office. This form is to be used only when signed by one partner.

Do you, or your domestic partner, claim any exemption to public record disclosure pursuant to Section 119, Florida Statutes? ☐ Yes ☐ No. *If “yes,” submit on a separate page a detailed explanation of exemption.*

**I swear or affirm under penalty of perjury that:**

1. The Domestic Partnership between \_\_\_\_\_,  
Former Domestic Partner  
and the undersigned, is hereby terminated; and
2. On \_\_\_\_\_, the City Clerk’s Office was provided with his/her last known address, which is \_\_\_\_\_. A copy of the termination statement shall be served by certified or registered mail on the other Registered Domestic Partner.

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. (     ) \_\_\_\_\_

**Notarization: (Required)**

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

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

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this \_\_\_\_\_ by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
**Signature of Notary Public**

**For Clerk’s Office Use Only:**

Filing Date \_\_\_\_\_ Received by: \_\_\_\_\_