

Birth Certificate Application

Please print application form and complete.

1. Applicant

Name of appli (State name ir	cant: Mr / Mrs / n full)	/ Miss / Ms			
Full postal add	dress:				
Postcode:				Telephone No:	
2.					
Are you applying for your own birth certificate?				YES / NO	
If no please st certificate rela		onship to the p	person to whom the		
3.					
It would help certificate is r		state the pur	pose for which the		
4. Details	of Birth Cer	tificate rec	quired		
Full Name at Birth			Father's Full Name		Mother's Full Name
Surname			Surname		Surname
Forename(s)			Forename(s)		Forename(s)
					Maiden Surname
<u>.</u>			•		
•			-		
Date of Birth			Place of Birth (Fu	ll address or Nar	me of Hospital)
Day Month Year					
5. Requir	ements (Se	e notes)			
Standard (Full) Birth Certificate (£10.00 each) £ (to be collected from a main register office within 5 working days)				I require	Birth Certificate(s)
Standard (Full) Birth Certificate (£12.00 each) £ (to be posted out (2 nd class) within 5 working days)				I require	Birth Certificate(s)
Priority Service (£20.00 each) £ (to be posted (1 st class) same day or collected from a main register office) f f				l require	Priority Birth Certificate(s)
Priority Service (£25.00 each) £				I require	Priority Birth Certificate(s)
(guaranteed next day delivery)					
6. Remitt	ance Encl	osed			
l enclose a c	heque / posta	I order in ste	rling for £		
7.					
Signature:				Date:	
FOR REGI	STER OFFI	CE USE ON	NLY		

Register No.	Certificate No.
Entry No.	
Date of issue:	

Web: www.northumberland.gov.uk/registrar