Northumberland County Council Registration Service

Birth Certificate Application

Please print application form and complete.

1. Applicant			
Name of applicant: Mr / Mrs / Mis (State name in full)	s / Ms		
,			
Full postal address:			
Postcode:		Telephone No:	
2.			
Are you applying for your own birth certificate?		YES / NO	
If no please state your relationship to the person to whom the certificate relates:			
3.			
It would help us if you would state certificate is required:	the purpose for which the		
4. Details of Birth Certific	ate required		
Full Name at Birth	Father's Full Nan	ne	Mother's Full Name
Surname	Surname		Surname
Forename(s)	Forename(s)		Forename(s)
			Maiden Surname
Data of Disth	Diana of Diate (
Date of Birth Day Month	Year Place of Birth (Full address or Nar	me of Hospital)
Day Month	real		
5. Requirements	L		
Standard (Full) Birth Certificate (£11.00 each) £		I require	Birth Certificate(s)
(Issued within 3 to 5 working days of receipt)		rrequire	Diffit Certificate(s)
Priority Service (£35.00 each) £ (Issued within 24 hours (Mon - Fri), posted 1st class)		I require	Priority Birth Certificate(s)
6. Remittance Enclose	d		
l enclose a cheque / postal ord	er in sterling for £		
7.			
Signature:		Date:	
FOR REGISTER OFFICE (JSE ONLY		
Register No.		Cert	tificate No.
Entry No.			
,			

Web: www.northumberland.gov.uk/registrar

Date of issue: