



VITAL STATISTICS DIVISION
**APPLICATION
FOR SERVICE**

MAILING ADDRESS: PRINT CLEARLY AND SIGN IN THE SPACE PROVIDED FOR SIGNATURE
THIS SECTION MUST BE FULLY COMPLETED BY THE APPLICANT

NAME			
MAILING ADDRESS			
ADDRESS (con't)		CITY & PROVINCE	POSTAL CODE
HOME TELEPHONE	BUS. TELEPHONE	FAX NO. (if applicable)	
SIGNATURE OF APPLICANT		RELATIONSHIP TO PERSON NAMED	
REASON CERTIFICATE IS REQUIRED			<input type="checkbox"/> SEND CERTIFICATE BY MAIL <input type="checkbox"/> WILL PICK UP CERTIFICATE

IF BIRTH CERTIFICATE(S) REQUIRED COMPLETE THIS SECTION (PLEASE PRINT)

SURNAME (IF FOR MARRIED WOMAN, STATE BIRTH SURNAME)		ALL GIVEN NAMES	SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
DATE OF BIRTH MONTH DAY YEAR	PLACE OF BIRTH (CITY OR TOWN)	NL	CERTIFICATE REQUIRED: <input type="checkbox"/> LONG FORM <input type="checkbox"/> SHORT FORM <small>*NOTE: Short Form will be issued if neither is specified. Short form does not contain parent's names</small>
SURNAME OF FATHER (GIVEN NAMES)			
BIRTH SURNAME OF MOTHER (GIVEN NAMES)			

IF MARRIAGE CERTIFICATE(S) REQUIRED COMPLETE THIS SECTION (PLEASE PRINT)

SURNAME BEFORE MARRIAGE	ALL GIVEN NAMES	SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	BIRTHPLACE
SURNAME BEFORE MARRIAGE	ALL GIVEN NAMES	SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	BIRTHPLACE
DATE OF MARRIAGE MONTH DAY YEAR	PLACE OF MARRIAGE (CITY OR TOWN)	NL	

IF DEATH CERTIFICATE(S) REQUIRED COMPLETE THIS SECTION (PLEASE PRINT)

SURNAME OF DECEASED	ALL GIVEN NAMES	SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
DATE OF DEATH MONTH DAY YEAR	PLACE OF DEATH (CITY OR TOWN)	NL
PERMANENT RESIDENCE OF DECEASED PRIOR TO DEATH	PLACE OF BIRTH MONTH DAY YEAR	

FOR OFFICE USE ONLY

	INITIALS	DATE	RECORD NO.
SEARCH			DATE OF REGISTRATION
			CERTIFICATE NO.
SECOND SEARCH			FILE NO.
			RECEIPT NO.
ISSUED			AMOUNT RECEIVED
			REFUND

METHOD OF PAYMENT

CASH
 CHEQUE
 MONEY ORDER
 VISA
 MASTERCARD
 EXPIRY DATE: _____

CREDIT CARD NUMBER _____ SIGNATURE _____

TO AVOID DELAY

Complete the appropriate section in full (All requests with incomplete information must be accompanied by a written explanation for the omission.)

Payment must be enclosed with the application and can be either by cheque or money order (Canadian Funds) payable to the Newfoundland Exchequer Account. It is against Postal Regulations to send cash through the mail.

Be sure your address and telephone number are correct and are clearly printed.

For residents outside St. John's, please indicate whether you wish to receive your certificate by mail or will pick it up.

BIRTH CERTIFICATES

(a) Short form birth certificates include the following information:

FULL NAME of the INDIVIDUAL, DATE OF BIRTH, PLACE OF BIRTH, SEX, REGISTRATION NUMBER and REGISTRATION DATE.

(b) A long form birth certificate also contains the parents' names.

MARRIAGE CERTIFICATES

Long form only is available and contains the name and sex of each party to the marriage, date of marriage, place of marriage, registration number, and registration date.

DEATH CERTIFICATES

Long form only is available and contains the name, date of death, place of death, age, sex, registration number, and registration date.

Certificates contain information extracted from the original registration filed in our office.

Service is available at the following locations:

GOVERNMENT SERVICE CENTRES

ST. JOHN'S OFFICE

5 Mews Place
P. O. Box 8700
St. John's, NL A1B 4J6
Telephone: (709) 729-3308
Facsimile: (709) 729-0946

HARBOUR GRACE OFFICE

P. O. Box 512
Main Highway
Harbour Grace, NL A0A 2M0
Telephone: (709) 945-3106/3107
Facsimile: (709) 945-3114

CLARENVILLE OFFICE

2 Masonic Terrace
Clarenville, NL A5A 1N2
Telephone: (709) 466-4061
Facsimile: (709) 466-4070

GANDER OFFICE

McCurdy Complex
P. O. Box 2222
Gander, NL A1V 2N9
Telephone: (709) 256-1420
Facsimile: (709) 256-1438

GRAND FALLS-WINDSOR OFFICE

Office Location: 9 Queensway
Mailing Address:
3 Cromer Avenue
Grand Falls-Windsor, NL A2A 1W9
Telephone: (709) 292-4348
Facsimile: (709) 292-4528

CORNER BROOK OFFICE

133 Riverside Drive, Noton Bldg.
P. O. Box 2006
Corner Brook, NL A2H 6J8
Telephone: (709) 637-2387
Facsimile: (709) 637-2905

HAPPY VALLEY-GOOSE BAY OFFICE

13 Churchill Street, Thomas Building
P. O. Box 3014, Stn. "B"
Happy Valley-Goose Bay, NL
A0P 1E0
Telephone: (709) 896-2661
Facsimile: (709) 896-4340

GRAND BANK OFFICE

Office Location: Buffett Building
Mailing Address:
P. O. Box 479
Grand Bank, NL A0E 1W0
Telephone: (709) 832-1672
Facsimile: (709) 832-1792

STEPHENVILLE OFFICE

35 Alabama Drive
Stephenville, NL A2N 3K9
Telephone: (709) 643-8650
Facsimile: (709) 643-8654

ST. ANTHONY OFFICE

Viking Mall
P. O. Box 28
St. Anthony, NL A0K 4S0
Telephone: (709) 454-8833
Facsimile: (709) 454-3206

LABRADOR CITY OFFICE

Bruno Plaza, Humphrey Road
P. O. Box 1079
Labrador City, NL A2V 2J8
Telephone: (709) 944-5859
Facsimile: (709) 944-5630