

# Application for a copy of a Civil Partnership Certificate

<b>Name of applicant</b>	_____
<b>Address</b>	_____
	_____
<b>Post Code</b>	_____
<b>Tel no</b>	_____
<b>e-mail</b>	_____

Are you applying for a copy of your own partnership certificate? YES/NO

If not, please state your relationship to the persons to whom the certificate relates \_\_\_\_\_

It would help us if you would state the purpose for which the certificate is required \_\_\_\_\_

## DETAILS OF PARTNERSHIP CERTIFICATE REQUIRED

PERSON 1	PERSON 2
Surname	Surname
Forename(s)	Forename(s)

Place of Partnership Ceremony			
Name of building or Register Office and locality			
Date of Partnership	Day	Month	Year

I require ..... certificate(s)

Fee ..... check fee payable with the Register Office

Remittance enclosed (Postal applications only) **Please enclose SAE**

I enclose a cheque/postal order for £ ..... made payable to "The Superintendent Registrar"

Signed \_\_\_\_\_

Date \_\_\_\_\_

For office use only	
Register No.	Certificate no.
Entry No.	Date of issue