

**APPLICATION FOR A  
CIVIL PARTNERSHIP CERTIFICATE**  
PLEASE READ THE NOTES OVERLEAF BEFORE  
COMPLETING THIS FORM

**FOR REGISTRATION  
AUTHORITY USE ONLY**

|          |         |               |
|----------|---------|---------------|
| Entry No | Cert No | Date of issue |
|----------|---------|---------------|

**1 APPLICANT**

Name of applicant Mr .....  
Mrs .....  
Miss/Ms ..... (State name in full)

Full postal address .....

Post code.....Telephone no.....

**2** Are you applying for your own civil partnership certificate? YES/NO If not please state your relationship to the person to whom the certificate relates .....

**3** It would help us if you would state the purpose for which the certificate is required .....

**4 DETAILS OF CIVIL PARTNERSHIP CERTIFICATE REQUIRED**

|                       |                       |
|-----------------------|-----------------------|
| Name of civil partner | Name of civil partner |
|-----------------------|-----------------------|

|   |   |
|---|---|
| Address at the time of the civil partnership registration | Address at the time of the civil partnership registration |
|---|---|

Place of the civil partnership registration

Date of the civil partnership registration

**5 REQUIREMENTS**

Civil Partnership Certificate £..... I require.....Full certificate(s)  
I require.....Extract(s)

**6 REMITTANCE ENCLOSED (Postal applications only)**

I enclose a cheque/postal order for £.....

**7**  
Signature..... Date.....