

Application for Birth Certificate

Vital Statistics Division

Digital Government and Service NL P. O. Box 8700 St. John's, NL A1B 4J6 Telephone: (709) 729-3308

Website: http://www.gov.nl.ca/dgsnl/

e-mail: vstats@gov.nl.ca

Please read important instructions before completing this application

Disclaimer: The Government of Newfoundland and Labrador cannot guarantee that a birth certificate with a gender marker "x" will be accepted by authorities in other organizations.

Each section must be FULLY completed

_	<u> </u>				
L	Name				
_	Mailing Address DREQUIRED TO OBIAIN				
Ś	Address (con't)	DTUC	City & Province	Postal Code	
APPLICANT INFORMATION	Home Telephone	Bus. Telephone	Email		
9	State your relationship to the subject named on the bi	State your relationship to the subject named on the birth certificate you are requesting FOR OFFICE USE ONLY			
É	Self (you must be at least 16 years of age) Mather (if child is under 19 years of age) (if child is under 19 years of age)				
Š	Mother (if child is under 19 years of age) Other (please specify)				
	Signature of Applicant	Reason certific	cate is required		
٩	Please check only one of the following				
	I will pick up the certificate, or Send certificate by mail				
2	If you are not the subject named on the birth certificate requested (or if you are a parent applying for your adult child's birth certificate child 19 years of age or over), written consent is required. Please ensure that this section is signed by the subject named on the birth certificate or that a signed and dated letter of consent is provided with your application. I,				
ÿ Z					
S					
	Signature of subject of birth certifica	ite		Date	
3	Is this person deceased?				
	Yes (proof of death must be attached) No Surname at birth All given names				
Z					
9 L	Female If "X" is selected please complete I,				
Z	Male U this section Newfoundland and Labrador cannot guarantee that a birth certificate with a gender marker "x" will be accepted by authorities in other organizations.				
9 1	Female If "X" is selected please complete this section I,			NL	
	Month Day Year Surname of father/other parent (Given names)			IAL	
<u> </u>	Birth surname of mother/other parent (Given names) Certificate required: Certified convert Certified convert				
	Long form Short form	Certified copy of Birth Registration		hort form will be issued if neither is specified. Short form does not contain parent's names	
ŀ	Initials	Date	Record no.		
EOR OFFICE LISE ONLY	Search		Date of registration		
T L	Second Search		Certificate no.		
T T			File no.		
	Issued		Receipt no.		
O a c	Acceptable ID presented? Entitled?		Amount received		
	Yes 🗀 No 🗀	Yes No	Refund		
"	Viethod of Payment				
	Cash Cheque Money Order Visa Mastercard Expiry Date:				
	Credit Card Number	redit Card Number Signature			

PRIVACY NOTICE

Personal information contained on this form is collected under the authority of the *Vital Statistics Act*, 2009. The Information provided will be used to fulfill the requirements of the *Vital Statistics Act*, 2009 for the release of birth Information. If you have any questions about the collection or use of this information, please contact a Vital Statistics representative at (709) 729-3308.

Who is entitled to apply for a Birth Certificate?

- the person is a natural person;
- the person is at least 19 years of age;
- the person
 - has known the person making the designation for at least one year and has signed a statement to that effect in the form set by the minister,
 - is a lawyer acting on behalf of the person making the designation, or
 - satisfies the registrar general that they are acting on behalf of or employed by a government, charitable or non-profit organization providing social support or social services to the person making the designation and has signed a statement to that effect in the form set by the minister.

Short form birth certificates include the following information:

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

A long form birth certificate contains all information on the short form certificate and also contains the parents' names.

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

Identification

Any person applying for a certificate is required to present acceptable identification - one piece of photo ID or two pieces of other ID, at least one of which contains their signature or address. A person who has written authorization to apply for or pick up someone else's certificate is required to present their own ID. Persons applying by mail are required to submit photocopies of their ID documents.

To avoid delay

Complete the appropriate sections 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.

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

Please indicate whether you wish to receive your certificate by mail or will pick it up.

NOTE: All mailed in requests should be sent to Mount Pearl office for processing.

Service is available at:

Vital Statistics Division Motor Registration Building 149 Smallwood Drive Mount Pearl, NL A1B 4J6 Telephone: (709) 729-3308

or visit our website: http://www.gov.nl.ca/dgsnl/department/bmd-contact/