## For Register Office use only Reg No Entry Cert No No POSTAL APPLICATION FOR A CIVIL PARTNERSHIP Payment Method Date of Issue CERTIFICATE **APPLICANT: - YOUR NAME AND ADDRESS (in block capitals)** Mr/Mrs/Miss/Ms Post Code: Contact Telephone No: **DETAILS OF CIVIL PARTNERSHIP CERTIFICATE REQUIRED (in block** capitals) **PARTNER 1 PARTNER 2** Forenames: Forenames: Surname: Surname: Previous Surname (if different): Previous Surname (if different): Date of Partnership: Place of Partnership: (Building, Register Office and locality) Month Year Day **PAYMENT** Payment for postal applications can be made by a cheque/postal order payable to **Hertfordshire County Council** Number of Certificates required (priority service - one working day)..... Number of Certificates required (five working days)..... **Payment Total** £ **BEFORE SENDING THIS APPLICATION PLEASE CHECK:** • Have you included a contact telephone number? Is your address written CLEARLY?

• Is the postal order or cheque made payable to Hertfordshire County Council? Please check the information on www.hertfordshire.gov.uk for certificate fees and alternative ways to apply.

Signature: Date: