	For Registe	r Office use only			
	Reg No		Entry	Cert No	
POSTAL APPLICATION			No		
FOR A					
MARRIAGE CERTIFICATE	Payment Method		Date of Issue		
APPLICANT: - YOUR NAME AND	ADDRES	S (in block capi	tals)		
Mr/Mrs/Miss/Ms					
	Post Code	:			
Contact Telephone No:					
DETAILS OF MARRIAGE CE	RTIFICATE	REQUIRED (in	block c	apitals)	
PARTNER 1		PA	RTNER 2		
Forenames:		Forenames:			
Surname:	ame:		Surname (before marriage):		
Any other surname used:		Any other surnam	e used:		
<u> </u>	ce of Marriage				
(Bui	ilding, Church	or Register Office	and locality	')	
Day Month Year					
Payment for postal applications of Hertfor	an be made dshire Coun		al order pa	yable to	
Number of Certificates required (price	ority service -	one working day)			
Number of Certificates required (five	working days	s)			
Payment Total					
.	£				
BEFORE SENDING THIS APPL	ICATION PI	EASE CHECK:			
 Have you included a contact to 					
 Is your address written CLEA 	•				
Is the postal order or cheque	made payak	ole to Hertfordshire	e County (Council?	
Please check the inform			-		
certificate fees and alter	native wa	ays to apply.			
Signature:	Date:				