

APPLICATION FOR BIRTH/DECEASED CERTIFICATE

		•		MAIL ING ADDD	EGO INEO	DMATION			
MAILING ADDRESS INFORMATION NOTE: Please PRINT your name, address and identifying information clearly. FOR OFFICE USE ONLY: AFS#									
NOTE: Please PRINT your name, address and identifying informat This portion will be used when mailing your service or correspon						у.			
SURNAME GIVEN NAMES									
MAILIN	NG ADDRESS								
CITY, PROVINCE/STATE, COUNTRY POSTAL CODE									
HOME PHONE (INCLUDING AREA CODE) WORK PHONE (INCLUDING AREA				A CODE)		IF COMPANY,	ATTENTION:		
BIRTH DETAILS	SURNAME	of name, must be provided; not the surname from marriage							
	GIVEN NAMES & SEX	First				Middle Names			☐ MALE ☐ FEMALE
	DATE & PLACE OF BIRTH	Month (ex: Feb) Day Year City							Province BRITISH COLUMBIA
-									
FATHER/ PARENT DETAILS	SURNAME	First Middle Names							
	GIVEN NAMES					Province/State			Country
FATH	BIRTH PLACE	Οι ty				Trovince/State			
MOTHER	SURNAME*	* NOTE: Mother's Maiden Surname (Surname before marriage) First Middle Names							
	GIVEN NAMES								
	BIRTH PLACE	City				Province/State			
NUMBER OF SERVICES REQUIRED									
The Birth/Deceased Certificate contains parental information and is only available in one size. NOTE - if the death occurred:									
Birth/Deceased Certificate (includes Parental information) Regular service - \$27.00 per certificate (average 2 to 5 days processing time)						Within BC: You must submit an original or a photocopy of a death certificate for the deceased individual.			
Birth/Deceased Certificate (includes Parental information) Courier service - \$60.00 per event*						Outside BC:			
*NOTE: All services, other than courier services, will be mailed. Courier service requests are produced *NOTE: All services, other than courier services, will be mailed. Courier service requests are produced									ndividual.
the next business day. Delivery time is dependent on shipping destination. Fee includes the cost of the search of our records. A certificate will be generated upon confirmation of a record held. If no record of the event is found, the fee will be applied to the search process. Courier service will not be attempted *A certified copy is a photocopy of a document, authenticated by an authorized official (Lawyer, Notary Public or Commissioner for Takin Affidavits), as a true photocopy of the original document.									or Commissioner for Taking
at the following residence types: post office box, apartment complex, homes that use Super Box mailboxes and basement suites. Instead, a delivery notice with instructions will be left at those residences and the package delivered to the nearest postal outlet. ID and signature will be required upon pick up.									
YOUR RELATIONSHIP TO BIRTH									
Executor/ Executrix Relative is defined as: Mother, Father, Son, Daughter, Sister, Brother, Spouse, Grandparent, Grandchild. Proof of relationship is required. See reverse for acceptable documentation. Other* (*requires written authorization from an eligible applicant)									
	on Certificate								
NOTE: If the above particulars are not completed in full, or if the correct payment per service requested is not enclosed, your request will be returned by mail.									
YOUR SIGNATURE (written):									
Cheque * Money Order Visa MasterCard American Express * Postdated cheques are not accepted									
·									
	OUNT LOSED \$		Interac/Cash payment may be made in person at one of our three offices. If paying by cheque or money order, make			Card holder signature			
	-		payable to	the Minister of Finance.		PRIN	T Card holder na	ame as showr	n on Credit Card

Credit Card #_

Expiry date _

IMPORTANT INFORMATION

TO AVOID DELAY

- * Please note who qualifies to apply for a certificate (see Section 3 below).
- * It is against postal regulations to send cash through the mail. Payment in **Canadian funds** should be forwarded by cheque (**Postdated cheques are not accepted**), bank draft or money order made **payable to the Minister of Finance**. Credit Card payments are accepted. Complete the Credit Card portion on the front of this form.
- * Be sure your address and telephone number are correct and clear.
- ★ A service charge of \$30.00 will be levied on all cheques <u>not</u> honoured by the payees' financial institution.
- * Attach a photocopy of the death certificate to this application form and state your relationship to the deceased. Read the note on the front of this form for further details.

1) FEES

Fees as noted for each requested copy on the front of this form.

*All fees subject to change. If ordering after April 1, 2016, contact our office for current fees.

2) INFORMATION PROVIDED

Certificates contain the following information and are in upper case.

Birth/Deceased Certificates (Includes name, date, place, sex, registration date and number, parents' names and birthplace).

3) WHO QUALIFIES TO APPLY FOR A BIRTH/DECEASED CERTIFICATE

Birth/Deceased certificates may be released to:

- a) The Executor or Executrix of the estate (a photocopy of a will or court order is required to support the application);
- b) A relative with proof of relationship;
- c) A person who has written authorization from a person described in line a) and b);
- d) An officer of any provincial government or the government of Canada who requires the certificate for use in the discharge of official duties;
- e) Any other person who satisfies the registrar general concerning the good faith of the person's cause for requiring the certificate.

Note: A relative is defined as: Mother, Father, Son, Daughter, Sister, Brother, Spouse, Grandparent, Grandchild.

Acceptable documentation to establish proof of relationship for a relative includes:

- · photocopy of a certified birth registration;
- photocopy of a parental certificate and if required;
- · associated marriage certificates.

MAILING ADDRESS

Vital Statistics Agency PO Box 9657 STN PROV GOVT Victoria BC V8W 9P3

ENQUIRIES & CREDIT CARD ORDERS

Telephone: 250 952-2681 (Victoria & Outside BC)

Toll free: **1 888 876-1633** (within BC)

OR VISIT ONE OF OUR OFFICES

VICTORIA: VANCOI 818 Fort St 250 - 609

Victoria BC

VANCOUVER: KELOWNA:

250 - 605 Robson St 305 - 478 Bernard Ave

Vancouver BC Kelowna BC

Check our Web Site at: http://www.vs.gov.bc.ca

The information on this form is collected under the authority of the *Vital Statistics Act* (RSBC 1996, c.479, Sec. 37 & 38). The information provided will be used to fulfill the requirements of the *Vital Statistics Act* for the release of birth information. If you have any questions about the collection or use of this information, please contact a Vital Statistics Client Service Representative at 250 952-2681, or write to the mailing address above.