

# BIRTH of BABY NOTIFICATION

Registration No:

Your name	
Applicants name (if Different from above)	
Current Address	

This to inform you of the birth of my/our baby	
Baby's full name	
Baby's Date of Birth	

## **PLEASE ENCLOSE**

### **PROOF OF CHILD BENEFIT AND A COPY OF THE BABY'S BIRTH CERTIFICATE**

**(Do not send original documents in the post).**

**These documents must be received before your application can be amended.**

Print your name:	Signature:
Print partners name:	Signature:
Date:	

Please return the completed form to: Housing Options Dept of



INVESTOR IN PEOPLE

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