

Date _____

Please complete the form below to receive your certificates and information.

Applicant's Name - Last Name		First Name	Middle Name
Street Number	Street Name		Apt. No.
City, Town or Village		Province	Postal Code
Phone Number		E-Mail Address	

Government Fees - Birth, Death, Marriage Certified Certificates

Any Certificate, Certified \$ 20.00 \$ _____

Government Fees - Birth, Death, Marriage Wallet-Sized Certificates

Any Certificate, Wallet-Sized \$ 25.00 \$ _____

Government Fees - Birth, Death, Marriage Photo Print of Registration

Any Certificate, Photo Print \$ 20.00 \$ _____

Certificates Express Ltd. Fees - Regular Service

Regular Service \$ 39.95 \$ _____

Processing \$ 20.00 \$ _____

Delivery \$ 30.00 \$ _____

G.S.T. (Regular Service) \$ 6.30 \$ _____

Certificates Express Ltd. Fees - Rush Service

Rush Service \$ 99.95 \$ _____

Processing \$ 20.00 \$ _____

Delivery \$ 30.00 \$ _____

G.S.T. (Rush Service) \$ 10.50 \$ _____

Total Payment \$

How Are You Paying?

Visa Mastercard Debit Other (please specify): _____

Name of Cardholder

Signature of Cardholder

Card Number

Expiry Date (Month/Year)

**APPLICATION FOR CERTIFICATE
OF BIRTH, MARRIAGE OR DEATH**
HEALTH AND WELLNESS
VITAL STATISTICS
435 KING STREET, ROOM 203
P.O. BOX 6000, FREDERICTON NB E3B 5H1
Telephone: (506) 453-2385
Fax: (506) 444-4139



**DEMANDE DE CERTIFICAT DE
NAISSANCE, DE MARIAGE OU DE DÉCÈS**
SANTÉ ET MIEUX-ÊTRE
STATISTIQUES DE L'ÉTAT CIVIL
435, RUE KING, PIÈCE 203
C.P. 6000, FREDERICTON NB E3B 5H1
Téléphone : (506) 453-2385
Télécopieur : (506) 444-4139

35-2262 (9/00)

Please read notes on the reverse of this form.
Please print all information clearly.
Complete in full and return to the office above

Prière de lire les remarques au verso
Prière d'écrire clairement en lettres moulées
Veuillez remplir en entier et renvoyer à l'adresse ci-dessus

Name And Mailing Address of Applicant Nom et l'adresse postale du demandeur	Name / Nom		Address / Adresse	
	City / Ville	Province	Postal Code postal	

If Birth Certificates Required, Complete This Section Pour obtenir un (des) certificat(s) de naissance, veuillez remplir cette partie	Surname (if married woman, maiden surname) Nom de famille ou nom de jeune fille si vous êtes mariée		Given Names / Prénoms		Medicare No. N° d'assurance-maladie	
	Birth Date / Date de naissance Yr. / Année Month / Mois Day / Jour	Sex / Sexe	Place of Birth / Lieu de naissance	County / Comté		
	Surname of Father / Nom de famille du père			Given Names / Prénoms		
	Maiden Surname of Mother / Nom de jeune fille de la mère			Given Names / Prénoms		

If Marriage Certificates Required, Complete This Section Pour obtenir un (des) certificat(s) de mariage, veuillez remplir cette partie	Surname of Bridegroom / Nom de famille de l'époux		Given Names / Prénoms		Medicare No. N° d'assurance-maladie
	Maiden Surname of Bride / Nom de jeune fille de l'épouse		Given Names / Prénoms		Medicare No. N° d'assurance-maladie
	Date of Marriage / Date du mariage Yr. / Année Month / Mois Day / Jour	Place of Marriage / Lieu du mariage			

If Death Certificates Required, Complete This Section Pour obtenir un (des) certificat(s) de décès, veuillez remplir cette partie	Surname of Deceased / Nom de famille du défunt		Given Names / Prénoms		Sex / Sexe	Medicare No. N° d'assurance-maladie
	Date of Death / Date du décès Yr. / Année Month / Mois Day / Jour	Place of Death / Lieu du décès				
	If deceased was married give name of spouse / Si le défunt était marié, indiquez le nom du conjoint			Name of Funeral Home (if known) Nom de la maison funéraire (si connue)		
	Name of Father of Deceased / Nom de famille du père du défunt		Maiden Name of Mother of Deceased Nom de jeune fille de la mère du défunt			

Indicate the Type and Number of Certificates Required Indiquez le genre et le nombre de certificats requis	Certified Certifié	Wallet Size Format-poche	Photographic Print Épreuve photographique	Relationship to Person Named Liens de parenté avec la personne nommée	
	Birth Naissance			Reason for Application / Raison de la demande	
	Marriage Mariage			Telephone / Téléphone Home / Résidence	Work / Travail
	Death Décès				
	<input type="checkbox"/> In English en anglais <input type="checkbox"/> In French en français		Fee Enclosed/credit or debit card \$ Complete reverse/Compléter au verso Montant inclus/carte crédit ou débit		Signature of Applicant / Signature du demandeur

OFFICE USE ONLY A L'USAGE DU BUREAU SEULEMENT	Client waiting at SNB Client en attente au SNB		Registration Number Numero d'enregistrement	Date Issued / By Date d'émission / Par	Issued By émis par
	Yes / Oui	No / Non			

Date: _____

To Whom It May Concern:

I, the undersigned, hereby authorize _____ of
Certificates Express Ltd. to apply for and receive a copy of my
_____ certificate.

Signed,

Signature: _____

Print Name: _____

Terms and Conditions

1. **CONFIDENTIALITY AGREEMENT**
Certificates Express Ltd. herein referred to as "CEL" certifies that all information the applicant provides, both written and/or verbal, will be held in the strictest of confidence. All information supplied will only be used for obtaining certificate applied for on applicant's behalf and for no other purpose.
2. Applicant assumes all responsibility and liability that the information on government forms is true and complete. "CEL" assumes no responsibility for any errors, omissions or incomplete or illegible information on application forms.
3. Where required, all forms must have an authorized guarantor in order to process.
4. Applicant must qualify based on government standards in order to receive and/or be eligible to receive certificates.
5. The authorization letter provided must be accompanied in order for "CEL" and/or one of its authorized representatives to obtain certificates on your behalf.
6. "CEL" assumes no responsibility and/or liability for government processing and/or producing of certificates.
7. Applicant agrees to be bound by the following terms and conditions with regard to PAYMENT:
 - a. Payments by Visa, Mastercard, debit card, other.
 - b. All payments and transactions are final.
 - c. The aforementioned term and condition is in full force and effect until "CEL" has received written notification from the applicant of a cancellation in such a manner as to afford "CEL" reasonable opportunity to act on said request.
 - d. "CEL" agrees to charge applicant only for services, government fees, G.S.T. and delivery charges, if applicable. There are no G.S.T. charges on government fees.
 - e. "CEL" service fee is over and above any applicable government fees.
 - f. Payments can be made in the form of a certified cheque, money order or bank draft. However, processing period will only commence upon receipt.
 - g. The applicant agrees that "CEL" is not responsible for credit/debit authorization or approval.
 - h. The applicant authorizes "CEL", in accordance with the following terms and conditions, to initiate credit/debit entries on behalf of the applicant.
8. "CEL" provides Urgent/Rush/Accelerated Service only when the following terms and conditions are met:
 - a. The service is offered by the jurisdiction in charge of the certificate being requested.
 - b. Where required, a valid guarantor must be available for confirmation — this is a government requirement.
 - c. All government terms and conditions must be met.
 - d. The authorization letter provided must be completed and signed and must accompany application in order that the "CEL" authorized representative can process and obtain certificate documents.
 - e. Government holidays and closures for any reason(s) voids Urgent Service
 - f. In some cases, proof of urgency must be provided. Please contact us for more information.
9. "CEL" provides Regular Service when the following terms and conditions are met:
 - a. Regular Service is based on standard government processing. Time frame for receipt of the requested documentation varies by jurisdiction.
 - b. Any time frame quoted regarding the receipt of requested documents is an estimation, not a guarantee.
 - c. In some cases, the applicant will be notified by "CEL" upon receipt of certificate from the government. In other cases, the issuing government will forward the completed document directly to the applicant. This varies by jurisdiction.
 - d. All other terms and conditions apply.

Sign Here: _____