**Application for a death certificate**

Please complete the form in full and ensure that you provide us with a telephone number to contact you to take the payment. Once you have completed the form please attach this as an email and send to: [chesterregisteroffice@cheshirewestandchester.gov.uk](mailto:chesterregisteroffice@cheshirewestandchester.gov.uk)

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| **Applicant’s details** | | | |
| Your full name | Click here to enter text. | | |
| Full postal address including postcode | Click here to enter text. | | |
| Contact telephone number | Click here to enter text. | | |
| Alternative contact telephone number | Click here to enter text. | | |
| Email address | Click here to enter text. | | |
| **Certificate details** | | | |
| Full name of deceased including any middle names and surname | Click here to enter text. | | |
| Date of death (dd/mm/yyyy) | Click here to enter text. | | |
| Date of birth (dd/mm/yyyy) | Click here to enter text. | | |
| Place of death (please provide address if known) | Click here to enter text. | | |
| Deceased last home address | Click here to enter text. | | |
| Last occupation of deceased | Click here to enter text. | | |
| **How would you like to receive the certificate?** | | | |
| **Collect** – please click yes/no using the drop down options.  (Chester Register Office only). | | | Choose an item. |
| **Posted** – please click yes/no using the drop down options.  (Postage fees apply £2.50 in UK or £3 if abroad). | | | Choose an item. |
| Please provide the full address including postcode for posting the certificate(s) if different from the address given above in ‘applicant’s details’. | | Click here to enter text. | |
| How many certificates do you require? – Please click the number using the drop down options. (**Certificate cost is £10 each**). | | Choose an item. | |

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| Application received date: |  | | Time: |  | | | Officer’s  initials: | |  | | | | | | |
| Payment  received date: |  | | Time: |  | | | Fee  collected: | |  | | | Debit/ credit card: | | |  |
| Officer’s  initials: |  | | Register number: |  | | | Entry  number: | | Certificate  number: | | | | | | |
| **Details of non-contact** | | | | | | | | | | | | | | | |
| Attempt one date: | |  | | | Time: | | |  | | | Officer’s initials: | | |  | |
| Attempt two date: | |  | | | Time: | | |  | | | Officer’s initials: | | |  | |
| **Details of how the customer received their certificate** | | | | | | | | | | | | | | | |
| Date collected from Chester Register Office: | | | | | |  | | | | Date posted: | | |  | | |

**For official use only**