

# Birth Certificate Application

Office Use Only - Our File #

## APPLICANT'S INFORMATION – PLEASE PRINT

|   |                |                             |             |
|---|----------------|-----------------------------|-------------|
| Surname                                 |                | First and Other Given Names |             |
| Mailing Address (Civic # or PO Box)     |                |                             |             |
| City                                    | Province/State | Country                     | Postal Code |
| Civic Address (If different than above) |                |                             |             |
| City                                    | Province/State | Country                     | Postal Code |
| Daytime Contact Number                  |                | Email Address               |             |
| Applicant's Signature                   |                | Date (MMDDYY)               |             |

## BIRTH DETAILS – INCLUDE FRENCH SYMBOLS IF APPLICABLE – USE MAIDEN SURNAME AS STATED ON BIRTH REGISTRATION IF MARRIED

|                              |       |     |      |   |  |                            |                            |                            |
|------------------------------|-------|-----|------|---|--|----------------------------|----------------------------|----------------------------|
| Surname                      |       |     |      | First Name  |  |                            |                            |                            |
| Second and Other Given Names |       |     |      |   |  | <input type="checkbox"/> M | <input type="checkbox"/> F | <input type="checkbox"/> X |
| Date of Birth                | Month | Day | Year | Birth Place – <b>Specify the name</b> of the City, Town, or Village |  |                            | Province                   | <i>Nova Scotia</i>         |

## FATHER'S/PARENT'S DETAILS – IF STATED ON BIRTH REGISTRATION

|  |  |  |  |                |  |         |  |
|--|--|--|--|----------------|--|---------|--|
| Surname  |  |  |  | First Name     |  |         |  |
| Second and Other Given Names                                     |  |  |  |                |  |         |  |
| Birth Place – <b>Specify the name</b> of the City, Town, Village |  |  |  | Province/State |  | Country |  |

## MOTHER'S/PARENT'S DETAILS – USE MOTHER'S/PARENT'S MAIDEN SURNAME AS STATED ON BIRTH REGISTRATION

|   |  |  |  |                |  |         |  |
|---|--|--|--|----------------|--|---------|--|
| Surname   |  |  |  | First Name     |  |         |  |
| Second and Other Given Names  |  |  |  |                |  |         |  |
| Birth Place – <b>Specify the name</b> of the City, Town, or Village |  |  |  | Province/State |  | Country |  |

## YOUR RELATIONSHIP TO THE BIRTH EVENT

|  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Self  | <input type="checkbox"/> Mother/Parent | <input type="checkbox"/> Father/Parent | <input type="checkbox"/> Other – Please indicate relationship |
| Reason certificate required:   |  |  |   |
| <p><b>If you are applying for a certificate on behalf of someone other than yourself or your minor child, you will need to have a consent form completed by the person on whose behalf you are applying, and you may have to complete a Statutory Declaration.</b></p> |  |  |   |

## CERTIFICATES REQUESTED, FEES AND PAYMENT METHOD – PLEASE INDICATE TYPES AND NUMBER OF CERTIFICATES REQUESTED

|   | Total Qty.  | Fee(s)  |
|---|---|---------|
| <input type="checkbox"/> Short Form   | <input type="checkbox"/> I do not want the sex indicator displayed on this birth certificate (see section 2 on reverse for description of certificate). | \$33.00 |
| <input type="checkbox"/> Long Form  | <input type="checkbox"/> I do not want the sex indicator displayed on this birth certificate (see section 2 on reverse for description of certificate). | \$39.90 |
| <input type="checkbox"/> Photographic Print of Registration   |   | \$39.90 |
| <input type="checkbox"/> Optional Courier Fee – This fee provides expedited shipping of certificate(s). The certificate(s) processing time is not expedited.  |   | \$20.00 |
| <p align="center"><b>METHOD OF PAYMENT</b> (Please ✓ box)</p> <p> <input type="checkbox"/> Cash (in person at counter only)             <input type="checkbox"/> Debit Card (in person at counter only)             <input type="checkbox"/> Cheque             <input type="checkbox"/> Money Order             <input type="checkbox"/> Visa             <input type="checkbox"/> MasterCard             <input type="checkbox"/> American Express         </p> |   |         |

## PAYEE INFORMATION – Complete section below

|  |
|--|
| Name as shown on Credit Card, Debit Card, Cheque, or Money Order |
| Mailing Address (if different than above)                        |
| Signature  |

Credit Card information to be removed as soon as the credit card payment is processed and the approval number received.

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PLEASE DO NOT PROVIDE CREDIT CARD NUMBER AND EXPIRY DATE IF PAYMENT IS IN PERSON AT COUNTER.

Credit Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_

## IMPORTANT INFORMATION

### 1) Who is eligible to apply for a Birth Certificate?

Birth certificates may be released to:

- You, if the record pertains to your own birth.
- A parent whose name appears on the child's birth registration.
- A lawyer who specifically indicates they are working on behalf of "a" or "b" above, or a person on the written authorization of "a" or "b" above.
- The executor or trustee of an estate, proof may be required.
- Guardian (copy of guardianship papers must be attached to this application).
- An Agent or Person Authorized in Writing by the Applicant who is applying on behalf of the applicant and who has known the applicant for at least one (1) year. The consent and statutory declaration must be completed.

### 2) Certificates contain the following information:

- Short Form: Full name, sex indicator, date of birth, place of birth, registration date, registration number, and date issued.
- Long Form: Full name, sex indicator, date of birth, place of birth, registration date, registration number, date issued, names of parents, and birthplace of parents.
- You have the option to not have the sex indicator shown on your short or long form birth certificate.
- Photographic Print of Registration: All the information that appears on the original registration, including full name, sex, date of birth, place of birth, registration date, registration number, and date issued, names of parents, birthplaces of parents, plus other information, for example, the name of the person who assisted at the birth, birth weight, etc.

### 3) Certificate sizes:

Please note: **Wallet sizes** are no longer available.

- Short Form dimensions are 12.5 cm wide by 17.5 cm high.
- Long Form dimensions are 12.5 cm wide by 17.5 cm high.
- Photographic Print of Registration dimensions are 21.5 cm wide by 35.5 cm high.

### To Avoid Delay:

- See section 1 above to be sure you are eligible to apply.
- Be sure your address and contact information are correct and clearly written.
- Complete all sections **in full**. If you have left any of the fields blank, include a letter explaining why.
- It is against postal regulations to send cash through the mail. Payment in Canadian funds should be forwarded by cheque, bank draft, or money order made payable to the Minister of Finance.
- If you are paying by credit card, include the name of the cardholder that appears on the card, mailing address, signature, card number, and expiry date. **NOTE:** Only Visa, MasterCard, and American Express are accepted.
- If payee is different from applicant and payment is being made by debit card, cheque, or money order, include name of payee and mailing address.

**Privacy Information:** The information on this form is collected under the authority of the Vital Statistics Act (Revised Statutes of Nova Scotia 1989, chapter 494).

**Disclaimer:** The Government of Nova Scotia cannot guarantee that a Birth Certificate with a sex indicator of X or no sex indicator displayed will be accepted by organizations in Nova Scotia or other provincial or federal organizations.

### Contact Us

#### Mailing Address:

Vital Statistics  
PO Box 157  
Halifax, Nova Scotia  
B3J 2M9 Canada

#### Enquiries:

Local: (902) 424-4381  
Toll Free: 1-877-848-2578 (Nova Scotia only)  
Fax: (902) 450-7313  
E-mail: [vstat@novascotia.ca](mailto:vstat@novascotia.ca)

#### Or Visit Our Office:

300 Horseshoe Lake Drive  
Bayers Lake Business Park  
Halifax, Nova Scotia  
B3S 0B7 Canada

**Hours:** 8:30 am to 4:30 pm Monday to Friday, except holidays.

**Website and ordering online:** [novascotia.ca/vitalstats](http://novascotia.ca/vitalstats)  
[novascotia.ca/bureau-de-letat-civil](http://novascotia.ca/bureau-de-letat-civil)