

Application form to correct details on a

Death Registration

Full guidance for completing this form can be found in the leaflet:

'How to apply for a correction to a death registration'

This can be obtained from any register office or from the General Register Office.

This form should be used when applying for a correction to the General Register Office You need to complete all sections of the form and then complete the checklist overleaf

Your Name			
Your contact details. Please include address, telephone number and email address	Address: Telephone number: Email address:		
Person's full name as on death certificate	s stated		
Person's date of deat stated on death certif			
Your relationship to t See guidance leaflet, See	the person named on the certification 4.	ate	
Details of the error(s) P	Please clearly explain in the boxes below	w what is wrong and what the c	orrect details are
	What is wrong:		ect details are :
Please give as full an exp	planation as possible of how the error o	occurred	
I have enclosed a cercorrecting. See guidan	rtified copy of the death certificat nce leaflet, Section 6	e that needs	YES NO
I have enclosed certified copies of suitably dated docume the correct information See guidance leaflet, Section 6 & 7		• •	YES NO
I would like my certifi See guidance leaflet. S			YES NO
See guidance leaflet, See	orrection to be made in my absen a a note in the margin	_	Please tick one box only

Please note: <u>before</u> certain types of corrections can be authorised, you may be asked to make a statutory declaration. The declaration must be signed by someone who legally can attest an oath. A fee may be charged for this service. If you need to make a declaration we will send a pre-worded form to you once your case has been assessed. See guidance leaflet, Section 8.

We aim to reply to your initial application within **10 working days.** However, if we ask you for more information or you need to send in more paperwork, you should expect each further reply to take up to **20 working days.** See guidance leaflet, Section 9.

Please include any further information you think may be relevant			
Contact details of the person who registered the death (if not given overleaf)			
Address: Telephone No: Email Address:			
I declare that the information supplied is true to the best of my knowledge and belief and that the evidence enclosed is a true copy of the original documentation			
Applicant's signature			
Date:			
<u>Check list</u>			
I have filled in all sections of the form			
have included a certified copy of the death certificate that needs correcting			
have enclosed document(s) that show the correct information			
For the purpose of detecting and preventing crime, information relating to an application may be shared and verified			

with other government departments or law enforcement agencies