



For Office Use Only
CON Reg #:

Application Duplicate Change of Name Certificate

<p>Help note 1</p> <p>The person who is applying for the duplicate Change of Name Certificates completes section A.</p> <p>Use your present name.</p> <p>“Surname” is your last name or family name.</p>	<p>A. Information about the person applying (See help <i>note 1</i> on the left)</p> <p>What is your first name?</p> <p>What are your middle names?</p> <p>What is your surname (last name or family name)?</p> <p>Mailing Address: (Street number and street name)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">PO Box Number</td> <td style="width: 35%;">Community</td> <td style="width: 35%;">Territory/Province</td> <td style="width: 15%;">Postal Code</td> </tr> <tr> <td>Home phone number ()</td> <td>Work phone number ()</td> <td colspan="2">Email address</td> </tr> </table>	PO Box Number	Community	Territory/Province	Postal Code	Home phone number ()	Work phone number ()	Email address											
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<p>Help note 2</p> <p>Give the Change of Name Certificate details for each person you want a duplicate certificate for.</p> <p>You can attach a separate piece of paper if you need more space.</p>	<p>B. Details on the Change of Name Certificates that you require (See help <i>note 2</i> on the left)</p> <p>1. What names appear on the CON certificate?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">What is the present first name?</td> <td style="width: 33%;">What are the present middle names?</td> <td style="width: 33%;">What is the present surname?</td> </tr> <tr> <td>What is the former first name?</td> <td>What are the former middle names?</td> <td>What is the former surname?</td> </tr> <tr> <td colspan="2">Date of Birth of this person: mm/dd/yy</td> <td>When was the name changed? mm/dd/yy</td> </tr> </table> <p>2. What names appear on the CON certificate?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">What is the present first name?</td> <td style="width: 33%;">What are the present middle names?</td> <td style="width: 33%;">What is the present surname?</td> </tr> <tr> <td>What is the former first name?</td> <td>What are the former middle names?</td> <td>What is the former surname?</td> </tr> <tr> <td colspan="2">Date of Birth of this person: mm/dd/yy</td> <td>When was the name changed? mm/dd/yy</td> </tr> </table>	What is the present first name?	What are the present middle names?	What is the present surname?	What is the former first name?	What are the former middle names?	What is the former surname?	Date of Birth of this person: mm/dd/yy		When was the name changed? mm/dd/yy	What is the present first name?	What are the present middle names?	What is the present surname?	What is the former first name?	What are the former middle names?	What is the former surname?	Date of Birth of this person: mm/dd/yy		When was the name changed? mm/dd/yy
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<p>Questions? Call Vital Statistics 1-800-661-0830</p>	<p>C. Signature (Person in section A signs here)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; text-align: center;"> x _____ Signature </td> <td style="width: 30%; text-align: center;"> _____ Date - mm/dd/yy </td> </tr> </table>	x _____ Signature	_____ Date - mm/dd/yy																
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<p>Send this completed application form and payment to:</p> <p style="text-align: center;">Registrar General of Vital Statistics Department of Health and Social Services Government of the NWT Bag #9 2nd Floor, IDC Building 107 MacKenzie Road INUVIK NT X0E 0T0</p>	<p style="text-align: center;">Fee for each certificate is \$25.00</p> <p>It is against postal regulations to send cash through the mail. Please make cheque or money order payable to:</p> <p style="text-align: center;">Government of the NWT</p> <p>You can also pay by credit card:</p> <p style="text-align: center;">Would You Like Us To Call You For Credit Card Information? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																		
<p>The personal information on this form is being collected under the authority of the <i>Change of Name Act</i> and will be used to register an eligible change of name. It is protected by the privacy provisions of the <i>Access to Information and Protection of Privacy Act</i>. If you have any questions about the collection or use, contact the Registrar General of Vital Statistics at 1-800-661-0830.</p>																			