



THE LONDON ASSAY OFFICE

## APPLICATION FORM HALLMARKING (DN2) NOTICE

PLEASE ENTER YOUR DETAILS

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Please type or print in **black** only

PERSONAL DETAILS	
Full Name Mr/Mrs/Miss/Other	
Company	
Full Postal Address	

PAYMENT

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PAYMENT DETAILS	
Please supply	Hallmaking (DN2) Notices @ £10.00 each
I enclose a cheque/PO, made payable to "London Assay Office" to the value of £	

RETURN BY POST

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Please return this form with your cheque/PO to:

**British Hallmarking Council**  
**PO Box 18133**  
**London**  
**EC2V 8JY**

**(c/o London Assay Office, Goldsmiths' Hall, Gutter Lane, London EC2V 8AQ)**