

BIRTHS, DEATHS AND MARRIAGES OFFICE OF REGULATORY SERVICES Department of Justice and Community Safety

APPLICATION FOR CERTIFICATE



Form 208 - APP

Births, Deaths and Marriages Registration Act 1997 Births, Deaths and Marriages Registration Regulation 1998

Civil Partnerships Act 2008

IMPORTANT INFORMATION

This form can be used to apply for a birth, death, marriage, civil partnership, or change of name certificate for events that have occurred and are registered in the Australian Capital Territory only. Single status and parentage searches can also be applied for by using this form. If you are unable to comply with the stated requirements, you will need to contact this office for further assistance.

If you are not applying in person at our office the certificate will be sent to you by registered person-to-person post. As a result you will need to produce appropriate identification at the post office in order to collect the certificate. Without that identification Australia Post will not allow you to collect the certificate.

For applications received through the post, we commit to fulfilling your request for a certificate within three working days of receiving your application providing we have enough information and evidence to establish your entitlement to the certificate. If your application does not meet our proof of identity requirements we may need you to reapply and provide additional identification and/or more information either by post or by attending our office.

FEES CURRENT TO 30 JUNE 2011

The fee for a standard certificate is \$38.00. The commemorative package fee (which includes a standard certificate and a commemorative certificate) is \$53.00 If delivered by mail the certificate will attract a \$8.00 registered person-to-person postage fee. If the certificate is to be sent overseas, a \$17.00 international registered post fee will apply.

Payment can be made by cash, credit card, EFTPOS, money order or cheque. All cheques should be made payable to the Office of Regulatory Services. Applications paid by personal cheque will be held for 7-10 working days for the cheque to clear.

PRIVACY INFORMATION

The *Births, Deaths and Marriages registration Act 1997* authorises the Registrar-General to collect the information required by this form. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the *Privacy Act 1988* (C'wlth). The Registrar-General may provide identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances. Documents provided as proof of identity may have their authenticity verified through Certificate Validation System (CVS) and the National Document Verification System (DVS). Documents issued by this office may also be verified by external agencies using CVS and/or DVS.

Once a person attains 18 years of age, the person's parents are unable to access the register without the persons consent. Further information and a copy of our access policy can be found on our website: <u>www.ors.act.gov.au</u>.

CONTACT INFORMATION

contact into							
Send completed forms to the Office of Regulatory Services:	GPO Box 158, Canberra ACT 2601						
Lodge in person at the Office of Regulatory Services:	255 Canberra Avenue, Fyshwick ACT 2609						
Office Hours:	9:00am to 4:30pm Monday to Friday						
General enquiries telephone number:	(02) 6207 0460						
Website address:	www.ors.act.gov.au						

INSTRUCTIONS FOR COMPLETION

- If completing this form by hand please use a blue or black pen only.
- This office will not accept lodgement of this form if it is not completed in full.
- Any alteration to information provided on this form must be struck through with a blue or black pen and substitute information must be clear and all parties must sign in the margin. Do not use white out.

If you require further information or need advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.



BIRTHS, DEATHS AND MARRIAGES OFFICE OF REGULATORY SERVICES

Department of Justice and Community Safety

APPLICATION FOR CERTIFICATE

Births, Deaths and Marriages Registration Regulation 1998



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Civil Partnerships Act 2008 Births, Deaths and Marriages Registration Act 1997

JUSTICE & COMMUNITY SAFETY

Processing Officer (Office use only)		Application Number (Office use only)					
DETAILS OF APPLICANT (Person complet	ing form)						
Surname		Given Name(s)					
Current Residential Address							
Daytime Contact Number	E-mail Address	Signature of Applicant					
Reason Certificate is Required	Relationship to Perso	n Named on Certificate	-				

POSTAGE DETAILS (All Certificates forwarded by mail attract a \$5.00 registered person to person postage fee) **Postal Address** (If different from residential address)

PROOF OF IDENTITY REQUIREMENTS

All photocopies of identification must be certified as true copies of the originals by a Solicitor, Police Officer, or Justice of the Peace. If you are applying for a birth, death, marriage, change of name certificate, civil partnership certificate, single status or parentage search, there are particular identification requirements necessary for you to either apply for own certificate or the certificate of another person.

	Your own certificate	You will require 3 forms of identification as described in table A. (see below)			
	A certificate for your child who is under 18	You will require 3 forms of identification as described in table A. (see below)			
A certificate for your child who is <u>over</u> 18		The Privacy Commissioner has advised that a parent does not have an automatic right of access to their child's birth certificate, once the child has turned 18. As a result, the Registrar-General will only provide access where the child consents in writing. You will require 3 forms of identification as described in table A. (below) for you as the applicant, 3 forms of identification as described in table A. (below) for the child whose behalf you are requesting the certificate, and a letter from the child giving consent that you may apply for the certificate on their behalf.			
	A certificate for another person	You will require 3 forms of identification as described in table A. (below) for you as the applicant, 3 forms of identification as described in table A. (below) for the person named on the certificate, and a signed letter from the person named on the certificate giving you consent that you may apply for the certificate on their behalf.			
	A certificate for another person where there is a legal need – solicitor, under power of attorney, welfare group, legal guardian.	You will require 3 forms of identification as described in table A. (see below) for you as the applicant and evidence of your authority to obtain the certificate which may include the following; Registered Power of Attorney, Court Order or Guardianship Order. For further information please contact the office on (02) 6207 0460.			

TABLE A - IDENTIFICATION REQUIRED TO BE PROVIDED UPON APPLICATION

3 forms of current identification must be provided upon application. At least 1 form must be from list 1 and 2 other forms of identification from list 2. In cases where a person is unable to provide enough forms of identification please contact this office.						
List 1	List 2	List 2				
Australian Drivers Licence	Medicare Card	Security Guard Licence				
Australian Passport	Credit Card or Account Card	Tertiary Education Institution Identification				
Firearms Licence	Centrelink Card Department of Veterans Affairs Card					
Proof of Age Card						

BIRTH CERTIFICATE APPLICAT	ΓΙΟΝ									
Standard Birth certificate	2	Commemo	orative	Birth cert	ificate			Comm	nemorative E	Birth package
Canberra Capital	Bluebell	Year 2000	🗌 CI	owns	Blue B	unny	🗌 Pir	nk Bunny	Bears	Duck
Surname at Time of Birth				Given N	ame(s) at	Time	of Birth			
	-									
Date of Birth	Place of Birth	1								
/ /										
Mothers Full Former Name (I	f any)			Father/I	Parents F	ull Nan	ne			
DEATH CERTIFICATE APPLICA	TION									
Surname of Deceased				Given N	ame(s)					
Date of Death	Place of Deat	th in the ACT								
/ /										
Mothers Full Former Name (I	f any)			Father/I	Parents F	ull Nan	ne			
	(commemorative co	ertificate available)			PARTNER	SHIP C		ATE		
Standard Marriage certific	-	Commemorat	ive Ma	rriage cei	rtificate		Co	ommemo	orative Marr	iage package
(Commemorative certificates are curre			() ()							D ¹ · · · ·
Surname of Groom/Partner 2	L	Given Name	e(s) of C	sroom/Pa	artner 1				Date of	Birth
										' /
Surname of Bride/Partner 2		Given Name	e(s) of E	Bride/Par	tner 2				Date of	Birth
										' /
Date of Marriage/Endorseme	ant Place of	Marriage/Endors	somon	•						-
Date of Wallage/Endorseline		Wallage/Elluois	semen							
CHANGE OF NAME CERTI	FICATE		NTAGE	E SEARCH	CERTIFIC	ATE			SINGLE ST	ATUS SEARCH
Surname at Time of Birth					ame(s) at		of Birth			
					.,					
Current Surname (If different)				Current Given Name(s) (If different)						
Date of Birth	Place of Birth	1	1							
/ /										
, ,										
PAYMENT DETAILS						1				
Visa Master	card	Expiry Date			/	An	nount	\$		
			ſ	, ardholde	r					
Cardholder Name				ignature	•					
Card Number										
PLEASE NOTE: Payments may be	e made by chequ	e, money order or	credit o	card if lod	ged by pos	t, or als	o by cas	h or EFTP	OS if lodged	in person.

Applications paid by personal cheque will be held for 7-10 working days for the cheque to clear.