Request to search access register



Notes

Access register

The access register records who has applied to access birth, marriage, civil union, and name change records **on or after 25 January 2009**. From 15 June 2023, death records are also included in the access register. Generally, every request for recent information is recorded in the access register.

You may obtain a report from the access register of access requests relating to:

- · your own birth, marriage, civil union or name change records; or
- another person's birth, death, marriage, civil union or name change records, if you are the person's personal representative (see below).

The access register contains:

- the name of the applicant;
- the date the applicant made the request to access the records; and
- whether or not the request for access was granted.

If an individual applied on behalf of a company or organisation for access to the records, the organisation's name will appear in the access register as the applicant.

The access register does not include details of access granted to:

- public sector agencies for maintenance of the law purposes;
- authorised public sector agencies receiving information for information matching programmes;
- authorised researchers (demographic, historical, statistical or health);
- older historical information.

There is currently no fee to request a report from the access register.

Personal representative

A "personal representative" means:

- a parent or guardian of a person, if that person has not attained the age of 18 years and has not earlier married nor entered into a civil union or de facto relationship; or
- a person who has been granted a power of attorney or has been given written authority by a person, if that person has
 attained the age of 18 years or has earlier married or entered into a civil union or de facto relationship; or
- if the person is deceased, the executor, administrator, or trustee of the deceased person's estate.

Documents the personal representative must provide (if applicable):

If the personal representative is a parent or guardian of the subject of the record and;

- the parent is named in the subject's birth information registered in New Zealand—state this in a signed letter.
- the parent is named in the subject's birth information registered outside New Zealand—provide a certified true copy of the child's birth certificate, which must name the parents (include a translation if not in English).
- was appointed as a Testamentary guardian by a deceased parent under section 26(2) of the Care of Children Act 2004 or section 7(2) of the Guardianship Act 1968—provide a certified true copy of the deed or will.
- is a Court appointed or approved guardian—provide a certified true copy of the Court appointment or approval.

If the personal representative has been granted a power of attorney or has been given written authority by the subject of the record, attach a certified true copy of the:

- power of attorney; or
- · written authority.

To contact us

- Visit our website <u>www.govt.nz/bdm</u>
- Freephone 0800 22 52 52 (New Zealand only). If overseas phone + 64 9 339 0852
- Email bdm.nz@dia.govt.nz

Post this completed and signed form, with attachments to:

Births, Deaths and Marriages P O Box 10-526 Wellington 6140 New Zealand

Request to search access register



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pplicant to comp	plete and sign							
pplicant's full name								
First or given names				Surname or family name				
First or given names				Surna	ame or family	name		
elivery name and add	dress							
Addressee								
Flat number, stree	∍t number and n	ame						
Suburb or rural loc	cality							
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If you are the subjec	t's personal repres	sentative yo	u are required to provide	additional	I documentation	on—refer to	notes.	
pplicant's signature					Date			
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	of the access regis s as applicable):		ss to the following inform		stered in New Marriage ame or family	Civil	union	Name chan
Subject's full name	at birth (if differen	t from above	∍)					
First or given name	:S			Surna	ame or family	name		
Subject's date of bir	rth		Subject's place o	f birth				
Day /	Month /	Year	City or town			Cou	ntry (if not	New Zealand)
If death—date of o	death		Place of death					
Day /	Month /	Year	City or town			Cou	ntry (if not	: New Zealand)
If marriage or civil u	ınion —date of marr	iage or civil u	nion Place of marriag	e or civil uı	nion			
Day /	Month /	Year	City or town					
Marriage or civil ur	nion partner's full r	ame						
First or given name	es			Surr	name or family	/ name		

PrivacyThe information on this form is collected under the Births, Deaths, Marriages, and Relationships Registration Act 2021. As part of processing your request for a Births, Deaths and Marriages product or service, your identification details may be checked against other records held by Births, Deaths and Marriages or other government agencies, as authorised by law. Public sector agencies may search the Access Register for maintenance of the law purposes.

General Identity Declaration

Reference number, if known



Instructions

If you have any questions contact us ::

- Within New Zealand Freephone 0800 22 52 52
- Outside New Zealand phone +64 9 339 0852
- 1. The applicant must fully complete both Parts A and B
- 2. Part C must be completed by any other person 16 years of age or older

Warnings

It is an offence, punishable by imprisonment and/or a fine of up to \$10,000, to make a false statement to obtain a certificate, printout or a source document, or to provide any means of identification knowing that it is false or is suspected to be forged or falsified.

It is an offence to make any statement that is false for the purpose of the recording information under the Births, Deaths, Marriages, and Relationships Registration Act 2021.

Doub A My detaile (no the applicant)									
Part A My details (as the applicant) Current name									
Surname									
First names									
Name at birth (if different from above)									
Surname at birth (if different from above)									
First names at birth (if different from above)									
Place and date of birth									
Place of birth (town or city) including country if not New Zealand	Date of birth								
	D D M M Y Y Y								
Your daytime phone number (daytime) Your email address									
Toda da fame priorie namber (aufame).									
Part B My declaration (the applicant must complete)									
I declare that the information about me that is entered on this form is true and correct									
Signature	Date signed								
	D D M M Y Y Y								
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If applying on behalf of a company state their name below and include an original signed request on letterhead									
Vous name, or if applicable, the company name, will be entered in the cooper register. For information about	the cocces register visit wave govt 57/bdm								
Your name, or if applicable, the company name, will be entered in the access register. For information about the access register visit www.govt.nz/bdm									
Part C Referee's declaration (any other person 16 years of age or older must complete)									
I am 16 years of age or older and have known the applicant for at least 6 months or have seen a									
government issued photo identification of the applicant and I am satis									
applicant's identity stated in this form is true and correct									
Signature of referee	Date signed								
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Full name of referee	Phone number of referee 🖀								
Tail name of referee	There hamber of referee 2								
Contact address of referee ①									
Contact data coo of refered to									

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As part of processing your request, your identification details will be checked against other records held by the Department of Internal Affairs or other government agencies, as authorised by law.

[15 June 2023]