Information about how to revoke a registered relationship

Eligibility
Are you eligible to apply to revoke a registered relationship in NSW?

Only the parties to a registered relationship can apply to revoke that relationship.

One or both of the parties may apply. If only one of the parties is making the application they must serve a copy of the Service of Revocation Statement on the other party and lodge proof of that service.

Revocation of registration
The Registrar cannot revoke the registration until 90 days after a revocation application has been lodged and complied. The registration of a relationship is automatically revoked by the death or marriage of a party to the relationship. A court may make an order declaring the registration of a relationship void.

Relationship certificates
All relationship certificates in your possession must be returned to the Registry when lodging an application as they are no longer valid. Once the relationship is revoked an endorsement will be placed on the relationship registration. Any relationship certificates issued thereafter will include this endorsement to confirm that the relationship was revoked.

Instructions
How to apply

Use black ink and write in BLOCK letters. All corrections must be initialled.

Revoking together

1. Complete separate statutory declarations (revoking a registered relationship together) where both parties are making revocation.
2. Submit the following to the Registry:
   - Both completed, signed and witnessed statutory declarations
   - Payment details page
   - Certified ID documents from both parties
   - Return original relationship certificate/s

Revoking by yourself

1. Complete and copy the original Service of Revocation Statement.
2. Serve the copy of the Service of Revocation Statement by either:
   - Mailing by registered post to your registered partner’s last known address; or
   - Delivering the copy yourself; or
   - Emailing a copy of the document to the person’s email address.
3. Complete statutory declaration (revoking a registered relationship by yourself) declaring that you have served the copy.
4. Submit the following to the Registry:
   - Your completed signed and witnessed statutory declaration
   - Payment details page
   - Certified ID documents
   - Original Service of Revocation Statement
   - Return original relationship certificate/s

Identification documents (ID)

- Refer to Identification documents page.

Payment details

- Revoking a Relationship fee does not include a standard certificate. Please order this if required.
- Certificate fees are listed on our website www.nsw.gov.au/bdm

Notice to withdraw

- If both parties have applied to revoke the relationship, either party can apply to withdraw the application to revoke the relationship during the cooling off period.
- If one party has applied to revoke the relationship, only this party can apply to withdraw the application to revoke the relationship during the cooling off period.
- There is no fee to withdraw, but application fees are non-refundable.
- The Notice to withdraw application is available on our website.
How we deal with your information

How to lodge this application

Your right to privacy

The NSW Registry of Births Deaths & Marriages administers the Births, Deaths and Marriages Registration Act 1995 (NSW). The information required on this form is collected under the provisions of this Act and forms the basis for the revocation of a relationship. The relationship register is part of the civil records of NSW and is a permanent historical record. The public do not have access to these records.

The information held by the Registry may be used for statistical purposes and by law enforcement agencies, as well as other uses provided for by law. Such access for approved purposes may be granted to other Registries and certain government agencies (including Passport Office, Department of Immigration and Border Protection, and motor vehicle or driver licensing authorities) and to authorised non-government agencies.

To protect your privacy, the Registry requires proof of your identity. In line with the Privacy and Personal Information Protection Act 1998, the Registry is collecting this information so that it can determine your eligibility to apply to revoke a registered relationship, to obtain the requested certificate and to prevent fraud.

For further information on privacy please visit our website.

Disclosure of information

When you complete this application form, understand that you have consented to the release of information provided by you, to those agencies who may be able to validate that information in support of your application.

This information may be provided to agencies including (but not limited to) other Registries of Births, Deaths & Marriages, law enforcement agencies, Department of Foreign Affairs and Trade (DFaT), Department of Immigration and Border Protection (DIBP), and motor vehicle or driver licensing authorities. Usually these referrals will be to simply verify the documents or other evidence that you have provided us in making your application for a certificate. If there are discrepancies, we may require you to correct any errors with the issuing agency, before being able to process your application. It is extremely important that all your identity documents are accurate and reflect your correct identity information.

Documents provided as proof of identity may have their authenticity verified through the National Document Verification Service (DVS).

Documents issued by this office may also be verified by other organisations using DVS.

Fees and processing times

Check our website for fees and processing times.

Enquiries

Phone: 13 77 88
NRS: 1300 555 727 (hearing impaired)

Interpreting services are available by phoning the Translating and Interpreting Service (TIS National) on 131 450


NSW Registry of Births Deaths & Marriages
GPO Box 30
Sydney NSW 2001

OR lodge in person at a Service NSW service centre
www.service.nsw.gov.au
Identification documents

To protect your privacy, the Registry requires proof of your identity.

- Each applicant must provide one document from each category 1,2 and 3.
- If you are unable to provide one of each from Categories 1,2 and 3 you must still provide at least 3 forms of identification. At least one of these must be from Category 2, and two from Category 3.

Please note that a Medicare card and a Private health care card cannot be used together for the same applicant.

- If your identity documents do not show your current residential address, provide an identity document from Category 4 with your current residential address.
- All documents must be current.
- All copies of ID must be verified by an authorised witness as being true and correct copies of the originals.
- If you are unable to meet these requirements please contact the Registry.

Authorised witness

The following persons can certify copies of documents as being true copies of the originals.

- Justice of the Peace
- Notary Public
- Legal Practitioner (holding a current practising certificate)
- A person authorised to administer an oath under Section 26 of the Oaths Act 1900

<table>
<thead>
<tr>
<th>Category 1 Evidence of Right to be in Australia</th>
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<tbody>
<tr>
<td>Australian Birth Certificate Australian</td>
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<tr>
<td>Citizenship Certificate New Zealand</td>
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<td>Citizenship Certificate New Zealand Birth</td>
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<td>Certificate ImmiCard</td>
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<td>Certificate of Registration by Descent</td>
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<tr>
<th>Category 2 Linkage between identity and person (photo &amp; signature)</th>
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<tbody>
<tr>
<td>Australian Driver Licence</td>
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<tr>
<td>Australian Passport</td>
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<tr>
<td>Firearms Licence</td>
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<tr>
<td>Foreign Passport</td>
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<tr>
<td>Proof of age card or photo card issued by a government agency</td>
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<th>Category 3 Evidence of identity operating in the community</th>
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<tbody>
<tr>
<td>Medicare card</td>
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<td>Private health care card</td>
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<tr>
<td>Centrelink pensioner concession card, or other entitlement card</td>
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<tr>
<td>Australian Department of Veterans Affairs card</td>
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<tr>
<td>Security Licence</td>
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<td>Student or tertiary identity card</td>
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<tr>
<th>Category 4 Evidence of residential address</th>
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<tbody>
<tr>
<td>Council rates notice (issued in last 12 months)</td>
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<tr>
<td>Recent utility bill (electricity, water or gas) issued in the last 3 months</td>
</tr>
<tr>
<td>Lease agreement with rental ledger history</td>
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<tr>
<td>Superannuation fund statement</td>
</tr>
</tbody>
</table>

1. Australian passport must be current or expired within the last three years.
2. Overseas identity documents must be translated into English by an accredited translator such as the National Accreditation Authority for Translators and Interpreters (NAATI). Submit both the foreign and English translation documents together.
3. Documents showing bank/financial details and credit/debit cards are not accepted.
4. For proof of residential address, documents with a Post Office Box are not accepted.
Service of Revocation Statement
Revoking a registered relationship by yourself

Relationships Register Act 2010 (NSW)

Complete the following and deliver/post/email a copy of this page to the other registered person in the relationship.
The original is to be submitted with your “Statutory declaration revoking a registered relationship by yourself”.

I,

Family name
First given name Other given name(s)

am serving this notice to the person named below in the registered relationship

Family name
First given name Other given name(s)

to inform that I am applying to the NSW Births, Deaths and Marriages Registrar to revoke our registered relationship.

Signature

Date / /
False representation

If you knowingly provide false information in this statutory declaration, you may be guilty of an offence under Section 57 of the Births, Deaths and Marriages Registration Act 1995.

Section 57 – False representation: A person who makes a representation in an application, notice or document under this Act or in response to a notice under Section 44 of this Act (Registrar’s powers of inquiry), knowing the representation to be false or misleading in a material particular, is guilty of an offence.

Maximum penalty: 100 penalty units or 2 years imprisonment, or both.

Details of the person completing this declaration

I, [Family name]

First given name [ ] Other given name(s) [ ]

Date of birth / / Place of birth

of

Residential address

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

I declare that I have served a copy of the application to revoke the registered relationship signed by me, on the person named below (print full name of other registered person in the relationship)

by (please select the method of service which applies)

☐ Sending a copy by email to the person’s last known email address; or

☐ Sending it by registered post addressed to the person’s last known address; or

☐ Handing a copy of it to the person; or

☐ Putting it down in the presence of the person and telling them the nature of the document; or

☐ Leaving it as near as practicable to the person, being prevented from delivering it to them by violence or threat of violence.

Date of service / / at Time of service (hh:mm) :

I declare I have read and understand all the instructions in this document including ‘Your Right to Privacy’ and ‘Disclosure of Information’;

I declare that all statements made in this declaration are true and correct;

I am one of the persons in the registered relationship;

I wish to revoke the registration of this relationship;

I understand that this form remains the property of the State of NSW and that some or all of the information provided may be disclosed to persons or bodies with adequate entitlement to the information under the Relationships Register Act 2010 or the Registry’s Access Policy; and

I understand it is an offence under s29 of the Relationships Register Act 2010 to knowingly make a false or misleading representation in this application or its supporting documents and penalties may apply.
Statutory declaration
Revoking a registered relationship by yourself

Continued

Declarant

[An authorised witness must witness your signature, and supply other details below].

I certify that I have read and understood the declaration on the previous page.

Signature of declarant revoking a registered relationship alone

[Sign declaration in presence of authorised witness]

Date
(dd/mm/yyyy)

Authorised witness

An authorised witness who takes and receives a statutory declaration in NSW must confirm your identity before the declaration is made. If you have not known the authorised witness for at least 12 months, the authorised witness will need to sight one identity document (original or certified copy).

I certify the following matters concerning the making of this statutory declaration by the person who made it:

[*please cross out any text that does not apply]*

1 *I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
2 *I have known the person for at least 12 months OR *I have not known the person for at least 12 months, but I have confirmed the person’s identity using an identification document and the document I relied on was:

[describe identification document relied on – refer to page 1 “Statutory Declaration”]

Declared at

on (dd/mm/yyyy)  /  /

Before me

JP No.

Full name of authorised witness (block letters)

Contact phone number of authorised witness

Email of authorised witness

Address of authorised witness

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory  Postcode  Country

Tick correct title of authorised witness:

- Justice of the Peace
- Legal Practitioner (with current practising certificate)
- Notary Public
- A person authorised to administer an oath under Section 26 of the Oaths Act 1900
**False representation**

If you knowingly provide false information in this statutory declaration, you may be guilty of an offence under Section 57 of the Births, Deaths and Marriages Registration Act 1995.

Section 57 – False representation: A person who makes a representation in an application, notice or document under this Act or in response to a notice under Section 44 of this Act (Registrar’s powers of inquiry), knowing the representation to be false or misleading in a material particular, is guilty of an offence.

**Maximum penalty:** 100 penalty units or 2 years imprisonment, or both.

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**Applicant One**

<table>
<thead>
<tr>
<th>Family name</th>
<th>First given name</th>
<th>Other given name(s)</th>
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<tr>
<th>Residential address</th>
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<td>Address Line 1</td>
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<td>Address Line 2</td>
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<tr>
<td>Suburb/Town/City</td>
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<td>State/Territory</td>
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<tr>
<th>Contact Details</th>
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<td>Contact number</td>
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**I declare that I am in a relationship with**

**(print full name of other registered person in the relationship)**

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I declare I have read and understand all the instructions in this document including 'Your Right to Privacy' and 'Disclosure of Information'.

I declare that all statements made in this declaration are true and correct; I am one of the persons in the registered relationship; I wish to revoke the registration of this relationship; I understand that this form remains the property of the State of New South Wales and that some or all of the information provided may be disclosed to persons or bodies with adequate entitlement to the information under the Relationships Register Act 2010 or the Registry's Access Policy; and I understand that it is an offence under section 29 of the Relationships Register Act 2010 to knowingly make a false or misleading representation in this application or its supporting documents and that penalties may apply.
Declarant One

[An authorised witness must witness your signature, and supply other details below].

I certify that I have read and understood the declaration on the previous page.

Signature of person applying to revoke a registered relationship

Date (dd/mm/yyyy)

Applicant/Declarant ONE

Authorised witness

An authorised witness who takes and receives a statutory declaration in NSW must confirm your identity before the declaration is made. If you have not known the authorised witness for at least 12 months, the authorised witness will need to sight one identity document (original or certified copy).

I certify the following matters concerning the making of this statutory declaration by the person who made it:

[*please cross out any text that does not apply]

1 *I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and

2 *I have known the person for at least 12 months OR *I have not known the person for at least 12 months, but I have confirmed the person’s identity using an identification document and the document I relied on was:

[describe identification document relied on – refer to page 1 “Statutory Declaration”]

Declared at

In the state of

on (dd/mm/yyyy)

Before me

JP No.

Full name of authorised witness (block letters)

Contact phone number of authorised witness

Email of authorised witness

Address of authorised witness

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Tick correct title of authorised witness:

- [ ] Justice of the Peace
- [ ] Legal Practitioner (with current practising certificate)
- [ ] Notary Public
- [ ] A person authorised to administer an oath under Section 26 of the Oaths Act 1900
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Section 57 – False representation: A person who makes a representation in an application, notice or document under this Act or in response to a notice under Section 44 of this Act (Registrar’s powers of inquiry), knowing the representation to be false or misleading in a material particular, is guilty of an offence.

Maximum penalty: 100 penalty units or 2 years imprisonment, or both.

Applicant Two

I,

Family name

First given name Other given name(s)

Date of birth / / Place of birth

of

Residential address

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory Postcode Country

Contact Details

Contact number Email address

I declare that I am in a relationship with

(print full name of other registered person in the relationship)

of

Residential address

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory Postcode Country
Declarant Two

I certify that I have read and understood the declaration on the previous page.

Signature of person applying to revoke a registered relationship

Date

(dd/mm/yyyy)

/ /

Authorised witness

An authorised witness who takes and receives a statutory declaration in NSW must confirm your identity before the declaration is made. If you have not known the authorised witness for at least 12 months, the authorised witness will need to sight one identity document (original or certified copy).

I certify the following matters concerning the making of this statutory declaration by the person who made it:

[*please cross out any text that does not apply]

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2 *I have known the person for at least 12 months OR *I have not known the person for at least 12 months, but I have confirmed the person’s identity using an identification document and the document I relied on was:

[describe identification document relied on – refer to page 1 “Statutory Declaration”]

Declared at

In the state of

on (dd/mm/yyyy) / /

Before me

JP No. (signature of authorised witness)

Full name of authorised witness (block letters)

Contact phone number of authorised witness

Email of authorised witness

Address of authorised witness

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory Postcode Country

Tick correct title of authorised witness:

[ ] Justice of the Peace

[ ] Legal Practitioner (with current practising certificate)

[ ] Notary Public

[ ] A person authorised to administer an oath under Section 26 of the Oaths Act 1900
Your certificate will be mailed to you. See our website for current fees [www.nsw.gov.au/bdm](http://www.nsw.gov.au/bdm)

Please PRINT clearly in BLACK pen. Please complete all details.

### Payment Details

*Cheques payable to ‘NSW Department of Customer Service’*

Enclosed is a cheque*/ money order for $__________.

OR please debit my: AMEX  
Mastercard  
Visa $__________.

**Card number**

**Name of cardholder**

**Signature of cardholder**

A surcharge applies to credit card payments at the rate of 1.4% for AMEX and 0.4% for Mastercard or Visa.

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**APPLICANT’S DETAILS** (details of person completing this form). Please provide copies of at least three forms of current identification with your application.

<table>
<thead>
<tr>
<th>Family name</th>
<th>First given name</th>
<th>Other given name(s)</th>
<th>Company name</th>
<th>Company reference number</th>
<th>Suburb/Town/City</th>
<th>Postcode</th>
<th>Country</th>
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<th>State/Territory</th>
<th>Delivery address</th>
<th>Suburb/Town/City</th>
<th>Postcode</th>
<th>Country</th>
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<tr>
<th>Contact number</th>
<th>Email address</th>
<th>Signature of applicant</th>
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<td></td>
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<td>I certify that I understand the provisions on Identification, Privacy &amp; Disclosure and that the information I have provided is true and correct.</td>
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**DETAILS OF RELATIONSHIP**

**Applicant One details**

<table>
<thead>
<tr>
<th>Family name</th>
<th>Family name at birth</th>
<th>First given name</th>
<th>Other given name(s)</th>
<th>Date of birth</th>
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**Applicant Two details**

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<th>Family name</th>
<th>Family name at birth</th>
<th>First given name</th>
<th>Other given name(s)</th>
<th>Date of birth</th>
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