

## Certificate entitlement

If your Change of Name was registered with the NSW Registry of Births Deaths & Marriages after 1 April 1996 you can use this application to apply for a certificate.

If you are applying for your own certificate, you must provide:

- Three forms of your own ID (see below).

If you are applying for a certificate on behalf of another person, you must provide:

- A Letter of Authority (available at: [www.nsw.gov.au/bdm](http://www.nsw.gov.au/bdm)) giving permission from the person named on the certificate or if deceased, their next-of-kin. Please include their address, phone number and signature.
- Three forms of ID from the person giving permission (see below).
- Three forms of your own ID (see below).

## Identification (ID)

Please provide at least three forms of ID, one of each from categories 1, 2 and 3. If you are unable to provide ID from categories 1 and 2, you must still provide at least three forms of ID. At least two of these must be from category 3.

All documents except foreign passports must be current.

### Category 1

**If born in Australia:**

- An Australian birth certificate
- Record of immigration status:**
- Citizenship certificate
  - New Zealand citizenship certificate
  - New Zealand birth certificate

### Category 2

- Australian driver's licence
- Australian passport
- Firearms licence
- Foreign passport
- Proof of age card

### Category 3

- Medicare card
- Credit or debit card
- Centrelink or Department of Veterans Affairs card
- Security guard/Crowd control licence
- Tertiary education institution ID card

### Category 4

- Recent utility account with current residential address (issued within last three months)

## Your right to privacy

To protect your privacy, the Registry requires proof of your identity. In line with the *NSW Births, Deaths and Marriages Registration Act 1995* and the *Privacy and Personal Information Protection Act 1998*, the Registry collects information to determine your eligibility to obtain a certificate and to prevent fraud. Information may be used for statistical purposes and by law enforcement agencies, and other uses by law. For more 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.

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).



### Online

You can lodge this online at [www.nsw.gov.au/bdm](http://www.nsw.gov.au/bdm)



### Lodging by post

GPO Box 30  
SYDNEY NSW 2001



### Lodging in person

Service NSW service centres  
[service.nsw.gov.au](http://service.nsw.gov.au)



### Phone: 13 77 88

- Monday to Friday (7am-7pm)



### Hearing/Speech impaired, phone:

- TTY 133 677
- NRS 1300 555 727



### Translating and Interpreting, phone:

- TIS National 131 450

# Replacement Change of Name Certificate Application

YOU CAN COMPLETE THIS APPLICATION ONLINE AT:  
[nsw.gov.au/bdm](http://nsw.gov.au/bdm)



Registry of Births  
Deaths & Marriages

# Replacement Change of Name Certificate Application

ABN 81 913 830 179  
GPO Box 30 Sydney NSW 2001 Tel: 13 77 88



Registry of Births  
Deaths & Marriages

YOU CAN COMPLETE THIS APPLICATION ONLINE AT: [www.nsw.gov.au/bdm](http://www.nsw.gov.au/bdm)

**PRINT** clearly in **BLACK** pen and complete all details.

**Do you require Priority processing of your application?** Yes  Fee applies, see website for details. International Registered Post

Please specify the quantity you wish to receive e.g.

Change of Name certificate

Reason certificate is required  
(e.g. passport, school)

Your relationship to the person registered  
(e.g. self, mother)

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

Family name	<input type="text"/>		
First given name	<input type="text"/>	Other given name(s)	<input type="text"/>
Company name <i>(If applicable)</i>	<input type="text"/>	Company reference number <i>(If applicable)</i>	<input type="text"/>
Address	<input type="text"/>		
State/Territory	<input type="text"/>	Postcode	<input type="text"/>
		Country	<input type="text"/>
Delivery address <i>(If different from above)</i>	<input type="text"/>		
		Suburb/Town/City	<input type="text"/>
State/Territory	<input type="text"/>	Postcode	<input type="text"/>
		Country	<input type="text"/>
Contact number	<input type="text"/>		
		Email address	<input type="text"/>
Signature of applicant	<input type="text" value="X"/>		

I certify that I understand the provisions overpage on **Identification, Privacy & Disclosure** and that the information I have provided is true and correct.

## DETAILS OF CERTIFICATE REQUIRED

Date of birth	<input type="text" value="dd / mm / yyyy"/>	Present age	<input type="text"/>	Registration number <i>(If known)</i>	<input type="text" value=" /"/>	
Date change of name registered*	<input type="text" value="dd / mm / yyyy"/>	*If date unknown, period to be searched: From		<input type="text" value="dd / mm / yyyy"/>	To	<input type="text" value="dd / mm / yyyy"/>
<i>(Note, each extra 10 year search or part thereof incurs a cost)</i>						
<b>Name at birth</b>						
Family name	<input type="text"/>					
First given name	<input type="text"/>	Other given name(s)	<input type="text"/>			
<b>New name</b>						
Family name	<input type="text"/>					
First given name	<input type="text"/>	Other given name(s)	<input type="text"/>			
<b>Place of birth</b>						
Country	<input type="text"/>	Suburb/Town/City	<input type="text"/>			
<b>Parent 1 details</b>						
Family name <i>(Current)</i>	<input type="text"/>	Family name at birth	<input type="text"/>			
First given name	<input type="text"/>	Other given name(s)	<input type="text"/>			
<b>Parent 2 details</b>						
Family name <i>(Current)</i>	<input type="text"/>	Family name at birth	<input type="text"/>			
First given name	<input type="text"/>	Other given name(s)	<input type="text"/>			

**PAYMENT DETAILS** (complete this section for mail applications only). Please refer to [www.nsw.gov.au/bdm](http://www.nsw.gov.au/bdm) for fees.

Total Amount	\$ <input type="text" value=" ."/>	Please debit my:	AMEX <input type="checkbox"/>	Mastercard <input type="checkbox"/>	Visa <input type="checkbox"/>	OR Enclosed is a cheque*/money order <input type="checkbox"/>
Card number	<input type="text"/>					*Make cheques payable to NSW Department of Customer Service (non Priority only)
Name of cardholder	<input type="text"/>				Expiry date	<input type="text" value="mm / yy"/>
Signature of cardholder	<input type="text" value="X"/>					

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