Application to correct an entry by Funeral Directors



Births Deaths and Marriages Act 1995 (BDMR Act)

About this form

Complete this form in conjunction with the information provided in the Fact Sheet 18 Requesting corrections to a death registration.

Only Funeral Directors should use this form to apply for a correction to a death registration.

Funeral directors can act on behalf of the family for **up to two months** after the date of the registration.

If the family are applying for a correction, direct them to use Form 18 Correct an Entry Form available at www.bdm.nsw.gov.au

How we deal with your information

Privacy

The Registry is responsible for the administration of legislation including the *Births, Deaths and Marriages Registration Act* 1995 and the Relationship Register Act 2010 and the regulations made under those Acts. We collect information under those Acts in order to register NSW life events accurately and securely in perpetuity, ensuring their integrity and confidentiality.

The Register is a permanent historical record and part of the civil records of NSW. It is not available for public scrutiny. Information held in the Register is used to issue certificates in accordance with our Access Policy and can be used for a range of other purposes including statistical analysis, medical research, community planning and law enforcement.

When you complete this form, we use the information that you provide to us to respond to your request (which may include determining your eligibility and making a decision on your application) and to prevent fraud. We may disclose your personal information to a third party to verify that the information that you have provided to us is correct.

For more information about how we handle personal information, including who we may disclose it to, please read our Privacy Collection Notice, available at https://www.nsw.gov.au/births-deaths-marriages/about-us/privacy-collection-notice.

Warning

Please be aware that it is an offence under Part 5A of the *Crimes Act 1900* to provide false or misleading information or documents and it is an offence under the *Births, Deaths and Marriages Registration Act 1995* to make a false or misleading representation in an application, notice or document.

Enquiries

Phone: 02 6885 9334

Email: bdm-edeaths@customerservice.nsw.gov.au NRS: 1300 555 727 (Speech/hearing impaired)

TIS: 131 450 (Translating/interpreting service)

How to lodge

By email

Scan and send to:

bdm-edeaths@customerservice.nsw.gov.au

By post

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

In person

Service NSW Service Centre www.service.nsw.gov.au

Registry of Births Deaths & Marriages



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Application starts here			
Name of Funeral Director making declaration			
I, First given name			
Other given names			
Family name			
Funeral Director business name			
Funeral Director's business address			
Address			
Suburb/Town/City			
State/Territory	Postcode	Country	
Funeral Director's postal address (if different from above)			
Address			
Suburb/Town/City			
State/Territory	Postcode	Country	
Contact number	Email address		
Barcode that appears on the back (bottom of the page) of the certificate			
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Has the funeral director destroyed the original certificate?	? Please specify	Yes No	
Office Use Only			
Registration number			
Date amended			
Name of the amending officer			
Signature of the			
amending officer			

Registry of Births Deaths & Marriages



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Applicant's declaration	
I declare that the following error/omission has been noted on the Register and I request the Registrar to correct the entr	y as

follows:

Current information in register

Registration number

New information / amendment

Declaration

I declare that the information I have provided is true and correct. I understand that it is an offence under Part 5A of the *Crimes Act 1900* to provide false or misleading information or documents and that it is an offence under the *Births, Deaths and Marriages Registration Act 1995* to make a false or misleading representation in an application, notice or document.

Signature of the applicant

Date

Full name of applicant

Signature of witness*

Full name of witness

*Witness must be 18 years or over

Return/replacement of certificates

I understand that the funeral director has destroyed any certificates with the incorrect information and recorded the barcode of the certificate on this application. If the family are applying, they must return any original certificates, prior to a new certificate being issued.