

SCHEDULE 1

Form 1

Regulation 11(1)

PARTICULARS FOR REGISTRATION OF A BIRTH

Births and Deaths Registration (Northern Ireland) Order 1976, Article 10(1)

BIRTH registered in the district of

1. Child - Surname:
2. - Name:
3. - Sex:
4. - Date of birth:
5. - District of birth:
6. - Place of birth:
7. Father/Second Female parent - Name and surname:
8. - Occupation:
9. Mother - Name and surname:
10. - Occupation:
11. - Usual address:
12. - Maiden surname:
13. - Surname at marriage or civil partnership:
(if different from maiden surname)
14. Informant - Qualification:
15. - Address:
(if different from 11 above)
16. - Signature:
17. Date of registration:
18. Signature of Registrar: Registrar

Status: This is the original version (as it was originally made).

Form 2

Regulation 16(1)

PARTICULARS FOR THE REGISTRATION OF A STILL-BIRTH Births and Deaths Registration (Northern Ireland) Order 1976, Article 10(1)

STILL-BIRTH registered in the district of

1. Name and surname:
(if specified)
2. Sex:
3. Date of still-birth:
4. Place of still-birth:
5. Cause of still-birth:
6. Father/second female parent - Name and surname:
7. - Occupation:
8. Mother - Name and surname:
9. - Occupation:
10. - Usual address:
11. - Maiden surname:
12. -Surname at marriage or civil partnership:
(if different from maiden surname)
13. Informant - Qualification:
14. - Address:
(if different from 10 above)
15. - Signature:
16. Date of registration:
17. Signature of Registrar: Registrar

Form 3

Regulation 24(1)

PARTICULARS FOR REGISTRATION OF A DEATH
Births and Deaths Registration (Northern Ireland) Order 1976, Article 21(1)

DEATH registered in the district of

1. Name and surname:
2. Sex:
3. Date of death:
4. Place of death:
5. Usual address:
(if different from place of death)
6. Status:
7. Date and place of birth:
8. Occupation:
9. Maiden surname:
(of woman who had married or entered
into a civil partnership)
10. Cause of death:
11. Forename(s), surname and occupation
of spouse or civil partner:
12. Forename(s), surname, maiden surname
and occupation of mother:
13. Forename(s), surname and occupation
of father or second female parent:
14. Qualification of informant:
15. Address of informant:
16. Signature of informant:
17. Date of registration:
18. Signature of Registrar: Registrar

Status: This is the original version (as it was originally made).

Form 4

Regulation 14(1)

**DECLARATION BY MOTHER OF A CHILD FOR THE REGISTRATION/
RE-REGISTRATION OF A BIRTH**

Births and Deaths Registration (Northern Ireland) Order 1976, Article 14(3)(b)(i) or
14ZA(3)(b)(i)

For use where the child's parents are not married to each other or in a civil partnership with each other and the mother produces a statutory declaration of parentage made by the father or the second female parent

I,.....

residing at

do hereby solemnly and sincerely declare that

of

is the *father/second female parent of *MALE/FEMALE child named

born to me on theday of 20

at

and I request that the father's/second female parent's* name be recorded as such in the entry of birth of the said child.

Signature

Declared before me this day of 20.....

Signature of Registrar or Deputy Registrar for the District of

*Delete as appropriate

Form 5

Regulation 14(2)

DECLARATION BY FATHER OR SECOND FEMALE PARENT OF A CHILD FOR THE REGISTRATION/RE-REGISTRATION OF A BIRTH

Births and Deaths Registration (Northern Ireland) Order 1976, Article 14(3)(c)(i) or 14ZA(3)(c)(i)

For use where the child’s parents are not married to each other or in a civil partnership with each other and the father or second female parent produces a statutory declaration of parentage made by the mother

I,

residing at

do hereby solemnly and sincerely declare that I am the *father/second female parent of the

*MALE/FEMALE child named

born to

on the day of 20

at

and I request that my name be recorded as such in the entry of birth of the said child.

Signature

Declared before me this day of20

Signature of Registrar or Deputy Registrar
for the District of

*Delete as appropriate

Status: This is the original version (as it was originally made).

Form 6

Regulation 14(3)

**DECLARATION BY PARENT ON REQUEST FOR REGISTRATION/
RE-REGISTRATION OF A BIRTH**

Births and Deaths Registration (Northern Ireland) Order 1976, Article 14(3)(d)–(g) or
14ZA(3)(d)–(f)

For use where the child’s parents are not married to each other and there is produced to the
Registrar an order mentioned in Article 14(3) or 14ZA(3) of the Order

I, (full name)

of (address)

am the ±mother/father/second female parent of (child’s full name and surname)

.....

born to (full name of child’s mother)

on (date of birth)

at (place of birth)

*I do solemnly declare that the order detailed below has not been brought to an end or discharged
by an order of a court.

(details of order)

*I do solemnly declare that the parental responsibility agreement made on(date)

between and (names of parties to agreement)

in respect of (child’s full name and surname)

was made in compliance with Article 7 of the Children (Northern Ireland) Order 1995 and has not
been brought to an end by an order of a court.

Signature

Declared before me this day of20.....

Signature of Registrar or Deputy Registrar for the District of

± delete as appropriate

* complete the appropriate statement

Form 7

Regulation 15

CERTIFICATE OF STILL-BIRTH

Births and Deaths Registration (Northern Ireland) Order 1976, Article 15(3)

To be given only in respect of a child which has been completely expelled or extracted from its mother after the twenty-fourth week of pregnancy and which did not at any time after such expulsion or extraction breathe or show any other evidence of life

Insert a tick in appropriate box

I was present at the still-birth of a child born

I have examined the body of a child which I am informed and believe was born

at

on to

of

I hereby certify that

(i) the child was not born alive,

(ii) the sex was

(iii) to the best of my knowledge and belief the cause of the still-birth, the estimated duration of pregnancy of the mother and the weight of the foetus were as stated below:

Status: This is the original version (as it was originally made).

CAUSE OF THE STILL-BIRTH		
<p>I Direct Cause State foetal or maternal condition directly causing the still-birth.</p> <p>Antecedent causes State foetal and/or maternal conditions, if any, giving rise to the above cause, stating the underlying cause last.</p> <p>II Other significant conditions of foetus or mother which may have contributed to, but, in so far as is known, were not related to, direct cause of the still-birth</p>	<p>I</p> <p>(a)</p> <p>due to (b)</p> <p>due to (c)</p> <p>II</p>	<p>Estimated duration of Pregnancy</p> <p>..... Weeks</p> <p>Weight of foetus</p> <p>.....</p>

Insert a tick in the appropriate box

- 1. The certified cause of the still-birth has been confirmed by post-mortem.
- 2. Post-mortem information may be available later.
- 3. Post-mortem not being held.

Signature

Qualifications as registered by
General Medical Council:

Name (please print)

.....

Residence

GMC Registration No. or Registered
No. as Certified Midwife

.....

.....

Date

Form 8

Regulation 18(a)

CORONER'S CERTIFICATE TO THE REGISTRAR AFTER INQUEST IN RELATION TO A STILL-BIRTH

Births and Deaths Registration (Northern Ireland) Order 1976, Article 16(1)

To be given only in respect of a child which has been completely expelled or extracted from its mother after the twenty-fourth week of pregnancy and which did not at any time after such expulsion or extraction breathe or show any other evidence of life.

To be sent to the registrar within five days after inquest.

To the Registrar of Births and Deaths for the District of

I HEREBY CERTIFY that an inquest held by me on

at in the of

on the body of *male/female child I/the Jury found that the body was that of a *still-born child/that there was not sufficient evidence to show that the child was born alive.

The particulars required to be registered concerning the still-birth are as follows:

- 1. Name and surname:
(if specified)
- 2. Sex:
- 3. Date of still-birth:
- 4. Place of still-birth:
- 5. Cause of still-birth:
- 6. Father/second female parent - Name and surname:
- 7. - Occupation:
- 8. Mother - Name and surname:
- 9. - Occupation:
- 10. - Usual address:
- 11. - Maiden surname:
- 12. - Surname at marriage or
civil partnership:
(if different from maiden
surname)

The weight of the foetus was

The estimated duration of the pregnancy was weeks

I have stated below the particulars specified in Schedule 2 to the Civil Registration Regulations (Northern Ireland) 2012.

Witness my hand this day of 20.....

Signature

Coroner for Residence

Status: This is the original version (as it was originally made).

CONFIDENTIAL

In all cases: –

Mother’s date and place of birth.

How many children has the mother given birth to in total, excluding the current birth or births being registered?

Live born Still-born

If multiple birth – state number of live births and still-births at this confinement (including this still-birth)

Live born Still-born

Has the mother been married more than once or entered into a civil partnership more than once?

Where parents are married to each other or in a civil partnership: –

Father’s or second female parent’s date and place of birth.

Date and place of marriage or civil partnership.

Form 9

Regulation 18(b)

CORONER'S NOTIFICATION TO THE REGISTRAR

to the effect that he does not consider it necessary to hold an inquest in the case of a **STILL-BIRTH** reported to him by the Registrar or from some other source.

Births and Deaths Registration (Northern Ireland) Order 1976, Article 16(1)

To be given only in respect of a child which has been completely expelled or extracted from its mother after the twenty-fourth week of pregnancy and which did not at any time after the expulsion or extraction breathe or show any other evidence of life.

A		B	
[Not to be filled up in cases where a post-mortem examination has been made by direction of the Coroner under section 28 of the Coroners Act (Northern Ireland) 1959]		[To be filled up only in cases where a post-mortem examination has been made by direction of the Coroner under section 28 of the Coroner's Act (Northern Ireland) 1959]	
The circumstances connected with the alleged still-birth of the child of of Which is said to have taken place on at have been reported to me. I do not consider it necessary to hold an inquest and I have issued my authority for the disposal of the body. The child was still-born. The cause of the still-birth was –		I hereby certify that as a result of a post-mortem examination of the body of the child of of whose still-birth is said to have taken place on at the cause of the still-birth as disclosed by the report of Dr who made the examination is as follows –	
I	I	I	I
Foetal or maternal condition directly causing the still-birth	(a) due to	Foetal or maternal condition directly causing the still-birth	(a) due to
Foetal and/or maternal conditions, if any, giving rise to the above cause, stating the underlying cause last	(b) due to	Foetal and/or maternal conditions, if any, giving rise to the above cause, stating the underlying cause last	(b) due to
	(c)		(c)

Status: This is the original version (as it was originally made).

II	II
Other significant conditions of foetus or mother which may have contributed to but, in so far as is known, were not related to the direct cause of the still-birth	Other significant conditions of foetus or mother which may have contributed to but, in so far as is known, were not related to the direct cause of the still-birth
The weight of the foetus was	The weight of the foetus was
The estimated duration of the pregnancy was weeks	The estimated duration of the pregnancy was weeks
	I am satisfied that an inquest is unnecessary and I have issued my authority for the disposal of the body.
Signature	Signature
Coroner for	Coroner for
Residence	Residence
Date	Date

Form 10

Regulation 21

CERTIFICATE FOR PURPOSE OF DISPOSAL OF BODY OF STILL-BORN CHILD

Births and Deaths Registration (Northern Ireland) Order 1976, Article 15(6) and (7)

Form to be given on request to the qualified informant or to the person who has control over or who is effecting disposal of the body at a burial ground or other place, when a still-birth has been registered or when a written notice of a still-birth, accompanied by a doctor's or certified midwife's certificate of still-birth, has been given to the Registrar.

I certify that I have this day of 20

(a) the birth of a

(b) still-born child to

of

at

on the day of 20

Registrar's District

(a) Insert "registered" or "received written notice of".

(b) Insert "male" or "female".

Status: This is the original version (as it was originally made).

Form 11

Regulation 22

NOTICE OF DISPOSAL (STILL-BIRTHS)

Return to be made to the appropriate Registrar of Births and Deaths by person who has control over, or ordinarily effects disposal of bodies at any burial ground or other place where the body of a still-born child was disposed of without the production of a Registrar's Certificate of Registration (or Receipt of Notice) or a Coroner's Authority

Births and Deaths Registration (Northern Ireland) Order 1976, Article 15(9)

To the Registrar of Births and Deaths for the District of

The following particulars relate to a still-born child/still-born children whose still-birth(s) occurred in your District and whose body was /bodies were disposed of at

Date of still-birth (if known)	Date of disposal	Address at which still-birth occurred	Name and address of mother	For use of Registrar of Births and Deaths
				Register Entry Number
				Signed _____
				Registrar

Signature of Disposal Authority's Officer

Date

Form 12

Regulation 23

MEDICAL CERTIFICATE OF CAUSE OF DEATH

Births and Deaths Registration (Northern Ireland) Order 1976, Article 25(2)

Name of deceased

Usual residence

Place of death

Date of death day of 20

Date on which last seen alive and treated by me for the undermentioned conditions
..... day of 20

Whether seen after death by me

Whether seen after death by another medical practitioner

		These particulars not to be entered in death register
CAUSE OF DEATH		Approximate interval between onset and death
I <i>Disease or condition directly leading to death*</i>	I (a) due to (or as a consequence of)
<i>Antecedent causes</i> Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last	(b) due to (or as a consequence of)
II <i>Other significant conditions contributing to the death, but not related to the disease or condition causing it</i>	(c) II

I hereby certify that the above-named person has died as a result of the natural illness or disease for which he has been treated by me within twenty eight days prior to the date of death, and that the particulars and cause of death above written are true to the best of my knowledge and belief.

Signature Qualifications as registered by
General Medical Council

Name (please print)..... GMC Number

Residence Date

Health & Care Number of deceased should be entered here by certifying doctor

*This does not mean the mode of dying e.g. heart failure, asthenia, etc. It means the disease, injury or complication which caused death.

Status: This is the original version (as it was originally made).

Form 13

Regulation 28

CERTIFICATE TO BE GIVEN TO THE QUALIFIED INFORMANT OR TO THE PERSON GIVING WRITTEN NOTICE OF A DEATH IN RESPECT OF WHICH A MEDICAL CERTIFICATE OF CAUSE OF DEATH HAS BEEN GIVEN TO THE REGISTRAR

Births and Deaths Registration (Northern Ireland) Order 1976, Article 29(1) and (2)

I certify that I have this day of 20

(a) the death of

said to have died on the day of 20

at

Witness my hand this day of 20

Registrar

District

(a) insert "registered" or "received written notice of"

Form 14

Regulation 29

NOTICE OF DISPOSAL (DEATHS)

Return to be made to the appropriate Registrar of Births and Deaths by person who has control over or ordinarily effects disposal of bodies at any burial ground or other place where the body of any person was disposed of without the production of a Registrar's Certificate, Certificate of Registration (or Receipt of Notice) or a Coroner's Authority.

Births and Deaths Registration (Northern Ireland) Order 1976, Article 30

To the Registrar of Births and Deaths for the District of

The following particulars relate to a person/persons whose death(s) occurred in your District and whose body was/bodies were disposed of at

Name of deceased	Date of death (if known)	Date of disposal	Address at which death occurred	Usual place of residence of deceased	For use of Registrar of Births and Deaths Register Entry No.
					Signed Registrar

Signature of Disposal Authority's Officer

Date

Status: This is the original version (as it was originally made).

Form 15

Regulation 33(1)

**STATUTORY DOCUMENT IN CASE OF ERROR OF FACT OR SUBSTANCE
IN A REGISTER OF BIRTHS, STILL-BIRTHS OR DEATHS**

Births and Deaths Registration (Northern Ireland) Order 1976, Article 35(2)

Registrar's District

*I/We

of

being of the person whose

was entered on the day of 20 at No.....

in the Register of of the above District do solemnly and sincerely declare

according to the best of * my/our knowledge and belief that it is erroneously stated

..... and that instead thereof it should be stated

.....

Signature(s) of person(s) }

making declaration}

Declared before me this day of 20.....

Signature of officer in whose presence declaration was made

Qualification

*Delete as appropriate

Form 16

Regulation 33(2)

CERTIFICATE IN CASE OF ERROR OF FACT OR SUBSTANCE (OTHER THAN AN ERROR RELATING TO CAUSE OF DEATH) IN A CORONER'S CERTIFICATE CONCERNING A STILL-BIRTH OR A DEATH

Births and Deaths Registration (Northern Ireland) Order 1976, Article 35(3)

Registrar's District

I Coroner for the of

do hereby certify that in the Certificate signed by

respecting the dead body of /body of a still-born child born to

of on which an inquest was held

on the day of 20 it was erroneously stated that

..... whereas it should have stated that

..... as has been proved to my satisfaction by

Certified by me

Coroner for the of

this day of 20

Status: This is the original version (as it was originally made).

Form 17

Regulation 34(1)

APPLICATION FOR RECORDING OF CHANGE OF NAME OR SURNAME OF A CHILD UNDER 18 YEARS OF AGE

Births and Deaths Registration (Northern Ireland) Order 1976, Article 37(3)

The following information concerning the child must be supplied

- 1. Full name(s) and surname of child as registered
2. Date of Birth
3. Place of Birth
4. Sex
5. Mother's name(s), surname and maiden surname
6. Father's/Second Female Parent's name(s) and surname
7. Full name(s) and surname of child as changed
8. Date of any previous application for a change of name(s) or surname

*I/We make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835:

9. *I/We have given up the name(s)/surname [former name(s) and surname as shown at 1 above] for * my/our child and have adopted for all purposes the name(s)/surname [new name(s) and surname as shown at 7 above].

10. *I/We sincerely declare that the above particulars are correct and that *my/our child is known by the name and surname as stated at Section 7 above.

Name
Relationship to Child
(Signature)
Date
Full Postal Address
(inc postcode)
Tel. No
Declared before me this ... day of
... 20 ...

Name
Relationship to Child
(Signature)
Date
Full Postal Address
(inc postcode)
Tel. No
Declared before me this ... day of
... 20 ...

Signature of officer in whose presence
declaration was made
Name of officer in whose presence declaration
was made (please print)

Signature of officer in whose presence
declaration was made
Name of officer in whose presence declaration
was made (please print)

Qualification
Address or Company Stamp

Qualification
Address or Company Stamp

*Delete as appropriate

Form 18

Regulation 34(2)

APPLICATION FOR RECORDING OF CHANGE OF NAME OR SURNAME OF PERSON OVER 18 YEARS OF AGE

Births and Deaths Registration (Northern Ireland) Order 1976, Article 37(4)

The Applicant should supply the following information: —

- 1. Full name(s) and surname as registered
- 2. Date of Birth
- 3. Place of Birth
- 4. Sex
- 5. Mother's name(s), surname and maiden surname
- 6. Father's/Second Female Parent's name(s) and surname
- 7. Full name(s) and surname as changed
- 8. Date of any previous application for a change of name(s) or surname

I make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory Declarations Act 1835:

9. I have given up the name(s)/surname [former name(s)/surname] and have adopted for all purposes the name(s)/surname [new name].

10. I sincerely declare that the above particulars are correct and that I am known by the name and surname as stated at Section 7 above.

Signature of Applicant

Date

Full Postal Address

Tel No/E mail address

Declared before me this day of 20.....

Signature of officer in whose presence declaration was made

Name of officer in whose presence declaration was made (please print)

Qualification

Address or office stamp:

Status: This is the original version (as it was originally made).

Form 19

Regulation 35(2)

SHORT BIRTH CERTIFICATE

Births and Deaths Registration (Northern Ireland) Order 1976, Article 40

Surname:

Name:

Sex:

Date of Birth:

District of Birth:

(a) Certified to be a true copy of an entry in a register
(For use where certificate is issued by a Registrar)

..... Registrar

..... Date

(b) Certified to be a true copy of an entry in a register in the custody of the Registrar General and
given under the Seal of the General Register Office, Belfast ,
this day of 20

(For use where a certificate is issued from the General Register Office)

Form 20

Regulation 37

SHORT DEATH CERTIFICATE

Births and Deaths Registration (Northern Ireland) Order 1976, Article 40A

Name and surname:

Sex:

Date of Death:

Place of Death:

Usual Address:
(if different from place of
death)

Date and Place of Birth:

(a) Certified to be a true copy of an entry in a register
(For use where certificate is issued by a Registrar)

..... Registrar

..... Date

(b) Certified to be a true copy of an entry in a register in the custody of the Registrar General and
given under the Seal of the General Register Office, Belfast, this

..... day of 20

(For use where certificate is issued from the General Register Office)

Form 21

Regulation 44

**APPLICATION FOR AN ENTRY TO BE MADE IN THE RECORD OF
NORTHERN IRELAND CONNECTIONS**

Civil Registration Act (Northern Ireland), Section 31

**BIRTH/ DEATH/ MARRIAGE/ CIVIL PARTNERSHIP/
OVERSEAS RELATIONSHIP**

Information

This form is to be used to apply for the details of a birth, death, marriage, civil partnership or overseas relationship which occurred outside Northern Ireland to be recorded in the Record of Northern Ireland Connections. A copy of the entry in the register will be issued in respect of each application. Additional copies can also be purchased at the time of the application, or at any later time.

What qualifies a birth to be recorded?

One of the child's parents or grandparents was born in Northern Ireland; or
There is an entry in the Record of Northern Ireland Connections relating to a parent or grandparent of the child.

What qualifies a death to be recorded?

The deceased was born in Northern Ireland; or
A parent or grandparent of the deceased was born in Northern Ireland; or
There is an entry in the Record of Northern Ireland Connections in respect of a parent or grandparent of the deceased person; or
The person was normally resident in Northern Ireland, but died outside Northern Ireland.

What qualifies a marriage to be recorded?

One of the parties was born in Northern Ireland; or
A parent or grandparent of one of the parties was born in Northern Ireland; or
There is an entry in the Record of Northern Ireland Connection relating to a parent or grandparent of one of the parties; or
One of the parties was normally resident in Northern Ireland but married outside of Northern Ireland.

What qualifies a civil partnership or overseas relationship to be recorded?

One of the parties was born in Northern Ireland; or
A parent or grandparent of one of the parties was born in Northern Ireland; or
There is an entry in the Record of Northern Ireland Connections relating to a parent or grandparent of one of the parties; or
One of the parties was normally resident in Northern Ireland but formed a civil partnership/ relationship outside of Northern Ireland.

SECTION 1 – APPLICANT’S DETAILS

Full Name:
Full Postal Address (inc Postcode)
Daytime Tel No:
E mail Address:

SECTION 2 – DETAILS OF EVENT TO BE RECORDED

Full Forename(s):
Full Surname:
Country of Birth, Death, Marriage, Civil Partnership or Overseas Relationship:
Date of Birth, Death, Marriage, Civil Partnership or Overseas Relationship (DD/MM/YYYY):

SECTION 3 – DETAILS OF THE NORTHERN IRELAND CONNECTION

BIRTH – Please complete if you are applying for a birth to be recorded in the Record of Northern Ireland Connections

A. The person whose birth is subject of this application has a parent or grandparent who was born in Northern Ireland:

(Please give details of the parent’s or grandparent’s birth)

Full Forename(s):
Full Surname:
Place of Birth:
Date of Birth (DD/MM/YYYY)

OR

B. There is an entry in the Record of Northern Ireland Connections relating to one of the parents or grandparents of the person whose birth is subject of this application:

(Please give details of the existing event in the Record of Northern Ireland Connections)

Type of Event: Birth/Death/Marriage/Civil Partnership/Overseas relationship
Full Forename(s):
Full Surname(s):
Place of Event:
Date of Event:

DEATH – Please complete if you are applying for a death to be recorded in the Record of Northern Ireland Connections:

A. The person whose death is subject of this application was born in Northern Ireland or has a parent or grandparent who was born in Northern Ireland.

(Please give details of the deceased’s birth or their parent’s or grandparent’s birth)

Full Forename(s):
Full Surname(s):
Place of Birth:
Date of Birth (DD/MM/YYYY):

OR

Status: This is the original version (as it was originally made).

B. There is an entry in the Record of Northern Ireland Connections relating to one of the parents of grandparents of the person whose death is the subject of this application.

(Please give details of the existing event in the Record of Northern Ireland Connections)

Type of Event: Birth/Death/Marriage/Civil Partnership/Overseas Relationship
Full Forename(s):
Full Surname(s):
Place of Event:
Date of Event (DD/MM/YYYY):

OR

C. The person whose death is the subject of this application was normally resident in Northern Ireland at the following address but died outside Northern Ireland.

Postal Address:

MARRIAGE – Please complete if you are applying for a marriage to be recorded in the Record of Northern Ireland Connections

A. The person whose marriage is the subject of this application was born in Northern Ireland or has a parent or grandparent who was born in Northern Ireland.

(Please give details of the person's birth or details of their parent's or grandparent's birth)

Full Forename(s):
Full Surname:
Place of Birth:
Date of Birth (DD/MM/YYYY):

OR

B. There is an entry in the Record of Northern Ireland Connections relating to one of the parents or grandparents of the person whose marriage is the subject of this application.

(Please give details of the existing event in the Record of Northern Ireland Connections)

Type of Event: Birth/Death/Marriage/Civil Partnership/Overseas Relationship
Full Forename(s):
Full Surname(s):
Place of Event:
Date of Event (DD/MM/YYYY):

OR

C. The person whose marriage is the subject of this application was normally resident in Northern Ireland at the following address, but married outside of Northern Ireland.

Postal Address:

CIVIL PARTNERSHIP/OVERSEAS RELATIONSHIP – Please complete if you are applying for a civil partnership or overseas relationship to be recorded in the Record of Northern Ireland Connections

A. The person whose civil partnership/overseas relationship is the subject of this application was born in Northern Ireland or has a parent or grandparent who was born in Northern Ireland.

(Please give details of the person's birth or details of their parent's or grandparent's birth)

Full Forename(s):

Full Surname:

Place of Birth:

Date of Birth (DD/MM/YYYY):

OR

B. There is an entry in the Record of Northern Ireland Connections relating to one of the parents or grandparents of the person whose civil partnership or overseas relationship is the subject of this application.

(Please give details of the existing event in the Record of Northern Ireland Connections)

Type of Event: Birth/Death/Marriage/Civil Partnership/Overseas Relationship

Full Forename(s):

Full Surname(s):

Place of Event:

Date of Event (DD/MM/YYYY):

OR

C. The person whose civil partnership/overseas relationship is the subject of this application was normally resident in Northern Ireland at the following address but formed a civil partnership/overseas relationship outside Northern Ireland.

Postal Address:

SECTION 4 – SUPPORTING DOCUMENTATION REQUIRED

The following documentation is required to process the application and should be forwarded with the completed application form:

- (1) Original or certified copy of the birth, death, marriage/civil partnership/overseas relationship certificate relating to the event being recorded.
- (2) English translation of the information contained in that certificate, (if applicable)

SECTION 6 – APPLICANT'S SIGNATURE (must be completed)

Signature: Date

Status: This is the original version (as it was originally made).

Form 22

Regulation 45

APPLICATION FOR THE NOTIFICATION OF A BIRTH OR DEATH REGISTRATION TO A THIRD PARTY

Births and Deaths Registration (Northern Ireland) Order 1976, Article 40(B)

INFORMATION

This form is to be used to apply for details of a birth or death registration to be notified to a Government Department or private sector organisation.

Who can apply for details of a birth or death registration to be notified to a third party?

The person who provided the information for the registration of the birth or death.

Who can be notified of a birth or death registration?

Government Departments and private sector organisations, such as pensions and insurance companies, banks, building societies etc. A full list of participating organisations is available in the accompanying information leaflet.

When can an application be made for details of a birth or death registration to be notified to a third party?

At the time of registration.

SECTION 1 – APPLICANT’S DETAILS

- Full Name:
- Full Postal Address (inc postcode):
- Daytime Tel No:
- E mail Address:

SECTION 2 – DETAILS OF BIRTH OR DEATH REGISTRATION TO BE NOTIFIED

- Full Name and Surname as registered at birth/death:
- Date of Birth/Death:
- Place of Birth/Death:
- Sex:

SECTION 3 – ORGANISATIONS TO BE NOTIFIED OF THE BIRTH OR DEATH REGISTRATION

Please indicate which organisations are to be notified – these should be selected from the list contained in the information booklet and should be detailed beside the relevant category below:

- Government Department
- Pension Company
- Insurance Company
- Bank
- Building Society
- Other

SECTION 4 – APPLICANT’S SIGNATURE

Signature: Date:

Form 23

Regulation 46

**APPLICATION FOR THE NOTIFICATION OF A MARRIAGE
REGISTRATION TO A THIRD PARTY**

Article 35A of the Marriage (Northern Ireland) Order 2003

INFORMATION

This form is to be used to apply for details of a marriage registration to be notified to a Government Department or private sector organisation.

Who can apply for details of a marriage registration to be notified to a third party?

Either of the parties to the marriage.

Who can be notified of a marriage registration?

Government Departments and private sector organisations, such as pension and insurance companies, banks, building societies etc. A full list of participating organisations is available in the accompanying information leaflet.

When can an application be made for details of a marriage registration to be notified to a third party?

At the date of registration or within 6 weeks of that date.

SECTION 1 – APPLICANT’S DETAILS

Full Name:

Full Postal Address (inc postcode):

Daytime Tel No:

E Mail Address:

SECTION 2 – DETAILS OF MARRIAGE REGISTRATION TO BE NOTIFIED

Full Name and Surname (Party 1):

Full Name and Surname (Party 2):

Date of Marriage:

Place of Marriage:

**SECTION 3 – ORGANISATIONS TO BE NOTIFIED OF A MARRIAGE
REGISTRATION**

Please indicate which organisations are to be notified – these should be selected from the list contained in the information booklet and should be detailed beside the relevant category below:

- Government Department
- Pension Company
- Insurance Company
- Bank
- Building Society
- Other

SECTION 4 – APPLICANT’S SIGNATURE

Signature: Date:

Status: This is the original version (as it was originally made).

Form 24

Regulation 47

APPLICATION FOR THE NOTIFICATION OF A CIVIL PARTNERSHIP REGISTRATION TO A THIRD PARTY

Section 155(A) of the Civil Partnership Act 2004

INFORMATION

This form is to be used to apply for details of a civil partnership registration to be notified to a Government Department or private sector organisation.

Who can apply for details of a civil partnership registration to be notified to a third party?

Either of the parties to the civil partnership.

Who can be notified of a civil partnership registration?

Government Departments and private sector organisations, such as pension and insurance companies, banks, building societies etc. A full list of participating organisations is available in the accompanying information leaflet.

When can an application be made for details of a civil partnership registration to be notified to a third party?

At the date of registration or within 6 weeks of that date.

SECTION 1 – APPLICANT’S DETAILS

- Full Name:
- Full Postal Address (inc postcode):
- Daytime Tel No:
- E mail Address:

SECTION 2 – DETAILS OF CIVIL PARTNERSHIP REGISTRATION TO BE NOTIFIED

- Full Name and Surname (Party 1):
- Full Name and Surname (Party 2):
- Date of Civil Partnership:
- Place of Civil Partnership:

SECTION 3 – ORGANISATIONS TO BE NOTIFIED OF A CIVIL PARTNERSHIP REGISTRATION

Please indicate which organisations are to be notified – these should be selected from the list contained in the information booklet and should be detailed beside the relevant category below:

- Government Department
- Pension Company
- Insurance Company
- Bank
- Building Society
- Other

SECTION 4 – APPLICANT’S SIGNATURE

Signature: Date:

Form 25

Regulation 48

APPLICATION FOR THE NOTIFICATION OF A CHANGE OF NAME OR SURNAME TO A THIRD PARTY

Births and Deaths Registration (Northern Ireland) Order 1976, Article 37(4B)

INFORMATION

This form is to be used to apply for details of a change of name or surname to be notified to a Government Department or private sector organisation.

Who can apply for details of a change of name or surname to be notified to a third party?

The person who made the application to have the change of name or surname recorded on the birth entry. In the case of a person under 18 years of age this will be the person who applied for the name or surname change for the child.

Who can be notified of a change of name or surname?

Government Departments and private sector organisations, such as pension and insurance companies, banks, building societies etc. A full list of participating organisations is available in the accompanying information leaflet.

When can an application be made for details of a change of name or surname to be notified to a third party?

At the time the change of name or surname application form is submitted; or
Within 6 weeks of the notification that the change of name or surname has been recorded on the birth entry.

SECTION 1 – APPLICANT’S DETAILS

Full Name:

Full Postal Address (inc postcode):

Daytime Tel No:

E mail Address:

SECTION 2 – DETAILS OF CHANGE OF NAME OR SURNAME

Full Name and Surname as registered:

Full Name and Surname as changed:

Date of Birth:

Place of Birth:

Sex:

Mother’s Name and Maiden Surname:

Father’s/Second Female Parent’s name and surname:

Status: This is the original version (as it was originally made).

SECTION 3 – ORGANISATIONS TO BE NOTIFIED OF THE CHANGE OF NAME OR SURNAME

Please indicate which organisations are to be notified – these should be selected from the list contained in the information booklet and should be detailed beside the relevant category below:

- Government Department
- Pension Companies
- Insurance Companies
- Bank
- Building Society
- Other

SECTION 4 – APPLICANT’S SIGNATURE

Signature: Date:

SCHEDULE 2

Regulation 5

ADDITIONAL PARTICULARS CONCERNING BIRTHS AND STILL-BIRTHS

Births and Deaths Registration (Northern Ireland) Order 1976, Article 10(4)(b)(ii)

In all cases:

Mother’s date and place of birth

How many children has the mother given birth to in total, excluding the current birth or births being registered:

Live born:

Still born:

Has the mother been married more than once or entered into a civil partnership more than once?

Where parents are married to each other or in a civil partnership with each other:

Father’s or second female parent’s date and place of birth

Date and place of marriage or civil partnership