

[LEGAL NOTICE NO. 104]

BIRTHS, DEATHS AND MARRIAGES REGISTRATION ACT 1975

Births, Deaths and Marriages Registration (Amendment) Regulations 2021

In exercise of the powers conferred on me by section 32 of the Births, Deaths and Marriages Registration Act 1975 and with the approval of the Minister responsible for justice, I hereby make these Regulations—

Short title and commencement

1.—(1) These Regulations may be cited as the Births, Deaths and Marriages Registration (Amendment) Regulations 2021.

(2) These Regulations come into force on the date the Births, Deaths and Marriages Registration (Amendment) Act 2021 comes into force.

(3) In these Regulations, the Births, Deaths and Marriages Registration Regulations 1976 is referred to as the “Principal Regulations”.

Regulations 7, 8 and 9 inserted

2. The Principal Regulations are amended after regulation 6 by inserting the following new regulations—

“Registrar may require additional information

7. The Registrar may require a person who applies to have his or her name, or his or her child’s name, changed to provide additional information or documents as the Registrar deems necessary.

Consent of parents required for change of name of child

8. The consent of the parents is required for a child’s name to be changed.

Use of new birth certificate after change of name

9. If a person has changed his or her name in accordance with section 15 of the Act and these Regulations, he or she must only use his or her new birth certificate and must not use his or her previous birth certificate.”.

Schedule 1 amended

3. Schedule 1 to the Principal Regulations is amended by—

- (a) in item 4 of the table, deleting “birth or death entry” and substituting “birth certificate or death certificate”;
- (b) in item 5 of the table, deleting “marriage entry” and substituting “marriage certificate”;
- (c) deleting item 7 of the table; and
- (d) in item 12 of the table—
 - (i) deleting “deed poll”; and
 - (ii) deleting “\$15” and substituting “\$10”.

Schedule 2 amended

4. Schedule 2 to the Principal Regulations is amended by—
 (a) deleting Form 5 and substituting the following—

“FORM 5
(Regulation 4)



Ministry of Justice

BIRTHS, DEATHS AND MARRIAGES OFFICE

Form 5

(Regulation 4)

**APPLICATION FOR REGISTRATION OF CHANGE OF NAME
 AND DECLARATION FORM**

For official use only															
Date of Registration: Verified and processed by:	Birth Registration Number: Registration Venue: Birth Certificate updated by:														
<p>Instructions</p> <ol style="list-style-type: none"> 1. Please provide accurate and registered details on this application form. (All sections are compulsory and must be fully completed) 2. The person above 18 years of age changing his or her name or the parent(s) of the child under 18 years of age must be present and completed forms are to be submitted to any Births, Deaths and Marriages (BDM) Office. 3. Any person submitting any false information will be referred to the relevant authorities for further investigation and action. 4. Ensure to use name as recorded in the Birth Certificate and provide a valid photo ID for verification purposes. 															
<p>Part 1: Personal Details of Applicant as per Birth Certificate</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Birth Registration Number:</td> <td style="width: 50%;">Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</td> </tr> <tr> <td>First Name:</td> <td>Surname:</td> </tr> <tr> <td>Other Name:</td> <td>Place of Birth:</td> </tr> <tr> <td>Date of Birth: __/__/__</td> <td></td> </tr> <tr> <td>Current Occupation:</td> <td></td> </tr> </table> <p>Parent(s) Details:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Mother's First Name:</td> <td style="width: 50%;">Father's First Name:</td> </tr> <tr> <td>Mother's Surname:</td> <td>Father's Surname:</td> </tr> </table>		Birth Registration Number:	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	First Name:	Surname:	Other Name:	Place of Birth:	Date of Birth: __/__/__		Current Occupation:		Mother's First Name:	Father's First Name:	Mother's Surname:	Father's Surname:
Birth Registration Number:	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male														
First Name:	Surname:														
Other Name:	Place of Birth:														
Date of Birth: __/__/__															
Current Occupation:															
Mother's First Name:	Father's First Name:														
Mother's Surname:	Father's Surname:														
<p>Part 2: Proposed Change of Name (New Name)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Birth Registration Number:</td> <td style="width: 50%;">Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</td> </tr> <tr> <td>First Name:</td> <td>Surname:</td> </tr> <tr> <td>Other Names:</td> <td></td> </tr> </table>		Birth Registration Number:	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	First Name:	Surname:	Other Names:									
Birth Registration Number:	Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male														
First Name:	Surname:														
Other Names:															
<p>Part 3: Contact Details of Applicant</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Mobile:</td> <td style="width: 33%;">Home Phone:</td> <td style="width: 33%;">Work:</td> </tr> </table>		Mobile:	Home Phone:	Work:											
Mobile:	Home Phone:	Work:													
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Valid Photo Identification (Please specify):</td> <td style="width: 50%;">ID Number:</td> </tr> <tr> <td>Email:</td> <td></td> </tr> <tr> <td>Contact Preference: <input type="checkbox"/> Email <input type="checkbox"/> Phone</td> <td></td> </tr> </table>		Valid Photo Identification (Please specify):	ID Number:	Email:		Contact Preference: <input type="checkbox"/> Email <input type="checkbox"/> Phone									
Valid Photo Identification (Please specify):	ID Number:														
Email:															
Contact Preference: <input type="checkbox"/> Email <input type="checkbox"/> Phone															

Part 4: Residential Address Details of Applicant

Residential Address:

Part 5: Declaration by Applicant (18 years of age and over)

I, _____ solemnly and sincerely declare that:

1. I am over the age of 18 years;
2. I was born in Fiji and I have a Fijian Birth Certificate;
3. The information provided in this form is true and accurate to the best of my knowledge and I am aware that it is an offence under the False Information Act 2016 to provide false information to the Government and may result in a fine up to \$10,000 or imprisonment for a term up to 5 years or to both.

Signature of Applicant: *[Please see note below before you sign]*

_____ Date: _____

Note: Please sign this application in the presence of a Commissioner for Oaths/Notary Public

Part 6: Declaration by Parent(s) (For child below 18 years of age)

I /We, _____ solemnly and sincerely declare that:

1. I am/We are the parent(s) of the applicant mentioned in Part 1 and Part 2 of this application;
2. My/Our child was born in Fiji and has a Fijian Birth Certificate;
3. The information provided in this form is true and accurate to the best of my/our knowledge and I am/we are aware that it is an offence under the False Information Act 2016 to provide false information to the Government and may result in a fine up to \$10,000 or imprisonment for a term up to 5 years or to both.

Signature of Parent(s): *[Please see note below before you sign]*

Mother: _____ Date: _____

Father: _____ Date: _____

Note: Please sign this application in the presence of a Commissioner for Oaths/Notary Public

Part 7: For official use only (Tick only after verifying the valid Photo ID, BRN and confirming details in Part 1 and Part 3)

BDM Office: _____ Receiving Officer's Name: _____

Receiving Officer's Signature: _____

Valid Photo ID verified: No Yes If Yes, Photo ID number: _____

BRN verified: No Yes If Yes, BRN number: _____

Date: _____

WARNING

Providing false information to Government is an offence under the False Information Act 2016. If you are found guilty of providing false information to Government, you may be fined up to \$10,000 or imprisonment for a term up to 5 years or to both.


DISCLAIMER

The BDM Office shall not be responsible or liable for any direct, indirect, incidental, consequential, or other losses or damages howsoever caused, arising out of or relating in any way to the above change of name.

(b) after Form 8, inserting the following new forms—

“FORM 9
(Regulation 4)

BIRTH CERTIFICATE

	BIRTHS, DEATHS AND MARRIAGES REGISTRATION ACT 1975	BIRTH REGISTRATION NUMBER Registrar - General District Registrar
Birth Approved By		
CHILD (1) Name (2) Sex (4) Place of Birth	(3) Date of Birth 	1. 2. 3. 4.
PARENTS (5) Date Married (7) Previous issues (a) Living	(6) Place (b) Dead	5. 6. 7a. 7b.
FATHER (8) Name and father's name (9) Occupation (10) Date of Birth (12) If iTaukei, (a) Village (c) Tokatoka (e) Tikina (13) Other issues (a) Living	(11) Place of Birth (b) Mataqali (d) Yavusa (f) Province (b) Dead	8. 9. 10. 11. 12a. 12b. 12c. 12d. 12e. 12f. 13a. 13b.
MOTHER (14) Name, maiden surname and father's name (15) Occupation (16) Date of Birth (18) If iTaukei, (a) Village (c) Tokatoka (e) Tikina (19) Other issues (a) Living	(17) Place of Birth (b) Mataqali (d) Yavusa (f) Province (b) Dead	14. 15. 16. 17. 18a. 18b. 18c. 18d. 18e. 18f. 19a. 19b.
INFORMANT (20) Name and relationship to child (if any) (21) Occupation (22) Home Address		20. 21. 22.

REGISTRATION	
(23) Date of Registration	23.
(24) Place of Registration	24.
(25) Amendment	25.
I hereby certify that the above is a true copy of an entry in the Register of Births kept at the Registrar-General's Office, Suva, Fiji and extracted this day of 20 .	
<i>NB: Any alteration automatically invalidates this certificate</i>	
Printed By: <i>Registrar-General</i>

FORM 10
(Regulation 4)

CERTIFICATE OF DEATH

GOVERNMENT OF THE REPUBLIC OF FIJI <i>Births, Deaths and Marriages Registration Act 1975</i>		
CERTIFICATE OF DEATH		
Surname		
Other Names		
Gender		Date of Birth
Place of Birth		Age at Death
Mother's Name		
Father's Name		
VKB Details		
Province	Tikina	
Village	Yavusa	
Mataqali	Tokatoka	
Spouse's Name		
Issues of Marriage		

Date of Death		Place of Death
Cause of Death		
Medical Attendant		
Date Buried		Place Buried
Names of:		
(a) Minister/Priest	(a)	
(b) Informant/Witness	(b)	
Registration Number:		Date Registered:
BIRTHS, DEATHS AND MARRIAGES REGISTRATION OFFICE, SUVA		
I hereby certify that the above is a true copy of an entry in the Register of Deaths kept at the Registrar-General's Office, Suva, Fiji and extracted this day of 20 .		
REGISTRAR-GENERAL Births, Deaths and Marriages		

Made this 6th day of October 2021.

N. SINGH
Registrar-General

Approved this 6th day of October 2021.

A. SAYED-KHAIYUM
Attorney-General and Minister responsible for justice
