

# Request to Search Access Register



## Notes

### Access Register

The access register records who has applied to access birth, marriage, civil union, and name change records **on or after 25 January 2009**. Generally, every request for recent information (excluding death information) is recorded in the access register.

You may obtain a report from the access register of access requests relating to:

- your own birth, marriage, civil union or name change records; or
- another person's birth, marriage, civil union or name change records, if you are the person's personal representative (see below).

The access register contains:

- the name of the applicant;
- the date the applicant made the request to access the records; and
- whether or not the request for access was granted.

If an individual applied on behalf of a company or organisation for access to the records, the organisation's name will appear in the access register as the applicant.

The access register does not include details of access granted to:

- public sector agencies for maintenance of the law purposes;
- authorised public sector agencies receiving information for information matching programmes;
- authorised researchers (demographic, historical, statistical or health);
- other people when the record is death information or regarded as older historical information.

There is currently no fee to request a report from the access register.

### Personal Representative

A "personal representative" means:

- a parent or guardian of a person, if that person has not attained the age of 18 years and has not earlier married nor entered into a civil union or de facto relationship; or
- a person who has been granted a power of attorney or has been given written authority by a person, if that person has attained the age of 18 years or has earlier married or entered into a civil union or de facto relationship.

**Documents the personal representative must provide (if applicable):**

If the personal representative is a parent or guardian of the subject of the record and;

- the parent is named in the subject's birth information registered in New Zealand—State this in a signed letter.
- the parent is named in the subject's birth information registered outside New Zealand—Provide a certified true copy of the child's birth certificate, which must name the parents (include a translation if not in English).
- was appointed as a Testamentary guardian by a deceased parent under section 26(2) of the Care of Children Act 2004 or section 7(2) of the Guardianship Act 1968—Provide a certified true copy of the deed or will.
- is a Court appointed/approved guardian—Provide a certified true copy of the Court appointment/approval.

If the personal representative has been granted a power of attorney or has been given written authority by the subject of the record, attach a certified true copy of the:

- power of attorney; or
- written authority.

### To Contact Us

- Visit our website [www.bdm.govt.nz](http://www.bdm.govt.nz)
- Freephone 0800 22 52 52 (New Zealand only). If overseas phone (+ 64 4) 474 8150.
- Email [bdm.nz@dia.govt.nz](mailto:bdm.nz@dia.govt.nz)

**Post this completed and signed form, with attachments to:**

Births, Deaths and Marriages  
P O Box 10-526  
Wellington 6143  
New Zealand

Attach General Identity Declaration form (BDM 130)

BDM133

# Request to Search Access Register

THE DEPARTMENT OF INTERNAL AFFAIRS

Te Tari Taiwhenua

Please print clearly. Please initial any alterations. Tick boxes like this



## Applicant to Complete and Sign

### Applicant's Full Name

First or given names

First or given names

Surname or family name

Surname or family name

### Delivery Name and Address

Addressee

Flat number, street number and name

Suburb or rural locality

City or town

Postcode

Country (if not New Zealand)

### Entitlement

I am entitled to request this search of the Access Register because (tick one of the following):

I am the subject of birth, marriage, civil union and/or name change information, or

I am the personal representative of the person who is the subject of the birth, marriage, civil union and/or name change information—Refer to Notes.

### Attach documentation (as required)

A General Identity Declaration form (BDM130) **must** be fully completed, signed and attached to this form.

If you are the subject's personal representative you are required to provide additional documentation—Refer to Notes.

### Applicant's Signature

### Date

Day / Month / Year

Applicant's email address

Email address

Applicant's daytime mobile or phone number

( )

## Details of Subject of Access Register Search

I request a search of the Access Register on access to the following information registered in New Zealand

(tick as many boxes as applicable):  Birth  Marriage  Civil Union  Name Change

Subject's Full Name

First or given names

Surname or family name

Subject's Full Name at Birth (if different from above)

First or given names

Surname or family name

Subject's Date of Birth

Day / Month / Year

Subject's Place of Birth

City or town

Country (if not New Zealand)

**If Marriage**— Date of Marriage

Day / Month / Year

Place of Marriage

City or town

Country (if not New Zealand)

Marriage Partner's Full Name

First or given names

Surname or family name

**If Civil Union**— Date of Civil Union

Day / Month / Year

Place of Civil Union

City or town

Civil Union Partner's Full Name

First or given names

Surname or family name

### Privacy

The information on this form is collected under the Births, Deaths, Marriages, and Relationships Registration Act 1995. As part of processing your request for a Births, Deaths and Marriages product or service, your identification details may be checked against other records held by Births, Deaths and Marriages or other government agencies, as authorised by law. Public sector agencies may search the Access Register for maintenance of the law purposes.

# General Identity Declaration

BDM130 03/09

THE DEPARTMENT OF INTERNAL AFFAIRS

Te Tari Taiwhenua

Attach documents  
hereReference number Print clearly. Initial any alterations. Tick boxes like this 

## Applicant's Declaration

If requested by Births, Deaths and Marriages, complete this declaration in full and attach it to any other documents you are required to provide and post it to:

Births, Deaths and Marriages  
PO Box 10526  
Wellington 6143  
New Zealand

Read this:

**Warning:** It is an offence, punishable by imprisonment and/or fine of up to \$10,000, to make a false statement to obtain a certificate, printout or any other document, or to provide any means of identification knowing that it is false or is suspected to be forged or falsified.

**Note:** If applying for birth, marriage, civil union or name change information, the applicant's name may be entered in the Access Register. Contact us for more information about the Access Register.

Contact us if you have any questions:

- Visit our website [www.bdm.govt.nz](http://www.bdm.govt.nz)
- Email [bdm.nz@dia.govt.nz](mailto:bdm.nz@dia.govt.nz)
- Freephone 0800 22 77 77 (New Zealand only) or +64 4 474 8150 (if overseas).

## Applicant's Full Name

First or given names

Surname or family name

## Applicant's Full Name at birth (if different from above)

First or given names at birth

Surname or family name at birth

## Applicant's Date of birth

Date

 /  / 

## Applicant's Place of birth

City or town

Country (if not New Zealand)

If applying on behalf of a company or organisation include an original signed request on letterhead and their name below

I declare that the information about me that is entered on this form is true and correct

Signature of applicant

Date

 /  / 

Then have a trusted referee verify the  
information you have given on this form

## Privacy

The information on this form is collected under the Births, Deaths, Marriages, and Relationships Registration Act 1995. As part of processing your request for a Births, Deaths and Marriages product or service, your identification details may be checked against other records held by Births, Deaths and Marriages or other government agencies, as authorised by law.

## Trusted Referee's Declaration

Read this:

**Warning:** It is an offence, punishable by imprisonment and/or fine of up to \$10,000, to make a false statement to obtain a certificate, printout or any other document, or to provide any means of identification knowing that it is false or is suspected to be forged or falsified.

Contact us if you have any questions:

- Visit our website [www.bdm.govt.nz](http://www.bdm.govt.nz)
- Email [bdm.nz@dia.govt.nz](mailto:bdm.nz@dia.govt.nz)
- Freephone 0800 22 77 77 (New Zealand only) or +64 4 474 8150 (if overseas).

A trusted referee must be one of the following: (tick one of the following)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Registrar of Births, Deaths and Marriages | <input type="checkbox"/> Member of the Police | <input type="checkbox"/> Minister of religion |
| <input type="checkbox"/> Commonwealth Representative               | <input type="checkbox"/> Kaumatua             | <input type="checkbox"/> Lawyer               |
| <input type="checkbox"/> Registered medical doctor                 | <input type="checkbox"/> Registered teacher   | <input type="checkbox"/> Notary Public        |
| <input type="checkbox"/> Justice of the Peace                      | <input type="checkbox"/> Applicant's employer |   |

and must not be:

- A relative or part of the family group of the applicant; or
- A partner of the applicant; or
- A person who lives at the same address as the applicant.

Instructions to trusted referee:

- If the applicant's birth is registered in New Zealand complete statement 1 or statement 2.
- If the applicant's birth is registered outside New Zealand complete statement 2.

I declare that I am at least 16 years of age and (tick one of the following)

1. I have known the applicant for at least 12 months and to the best of my knowledge the information about the applicant's identity stated in this form is true and correct.
2. I have seen a current government-issued photo identification of the applicant and I am satisfied that it matches the information about the applicant's identity stated in this form.

Signature of trusted referee

Full name of trusted referee

Date

 /  / 

Daytime mobile or phone number of trusted referee

Contact address of trusted referee