

# Request for Source Document



**Te Tari Taiwhenua  
Internal Affairs**

## Contact Details

Website [www.govt.nz/bdm](http://www.govt.nz/bdm)

**Definition:** A source document is a document that contains information that was used to register a birth, death, marriage, civil union or name change. Source documents may not be available for all registrations, especially those before 1960.

Provide accurate and complete details to help us search

**Document type:**  Birth  Death  Marriage  Civil union  Name change

Subject's full names

If a marriage or civil union: Other parties full names

Date of event (or year of event)  If name change enter date of birth

Place of event (town/city) if known

### The reason I am requesting the document is because:

- I am the subject of the information (refer Note 1).
- I am the parent or guardian of the subject of the information, who is under 18 and has not earlier married or entered into a civil union or de facto relationship (refer Note 1).
- I have been granted a power of attorney or have been given written authority by the subject of the information, who is 18 years or older, or has earlier married or entered into a civil union or de facto relationship (refer Note 1). Include a copy of the power of attorney or written authority.
- The source document is required for the maintenance of the accuracy of the registered information. State your reasons why below.
- The source document is required for a purpose consistent with the purpose of recording the information under the [Births, Deaths, Marriages, and Relationships Registration Act 1995](#) that cannot be met by obtaining a certificate or print-out. State your reasons why below.

State reasons, if required. You can also use this field to provide us with additional information:

Note 1: Applies to birth, marriage, civil union, or name change information.

## My contact details

Name

Flat no  Street no  Street

Suburb or rural locality

City, town or district  Postcode

Country (if not New Zealand)

Email address  Best phone number

**Payment details**

Fee (\$25.00 each)

Courier fee (optional)

Total fee

**Courier fee (optional)**

To a New Zealand address \$5

To an overseas address (number in brackets is estimated delivery in working days)

Complete payment details on last page attached to this form.

**My declaration (the person ordering the document must complete)**

Surname

First names

Surname at birth (if different from above)

First names at birth (if different from above)

Place of birth (town or city) including country if not New Zealand

Date of birth

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

Signature

Date signed

If ordering on behalf of a company state their name below and include an original signed request on letterhead

Your details or the company name will be entered in the Access Register. For information about the Access Register visit [www.govt.nz/bdm](http://www.govt.nz/bdm)

**Referee's declaration (must be completed by another person who is 16 years of age or older)**

I have known the orderer for at least 6 months or have seen a government issued photo identification of the orderer and I am 16 years of age or older – I am satisfied the information about the orderer's identity stated in this form is true and correct

Signature of referee

Date signed

Full name of referee

Phone number of referee

Contact address of referee

**Send with fee to:** Post to Births, Deaths and Marriages, PO Box 10526, Wellington 6143, New Zealand

**Privacy Statement:** The information on this form is collected under the Births, Deaths, Marriages, and Relationships Registration Act 1995. As part of processing your request, your identification details will be checked against other records held by Births, Deaths, Marriages and Citizenship or other government agencies, as authorised by law.

**Complete on-screen and print**

You can complete this form on-screen using the Editable PDF functionality with Adobe Reader.  
You must still print off the application and have signed where applicable by hand.

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**Payment**

**Do not post cash or card**

Please charge my credit card (Visa, MasterCard, American Express, Prezy)

**Card number**

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**Card expiry date**

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**Name on card**

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**Cardholder signature**

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