



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:**

Birth Registration Number: \_\_\_\_\_

Date of Registration: \_\_\_\_\_

Registration Venue: \_\_\_\_\_

Verified and processed by: \_\_\_\_\_

Birth Certificate updated by: \_\_\_\_\_

*(Note: The above fields are compulsory)*

**Instructions:**

1. Please provide accurate and official details on this application form.
2. All applicants must be present in person and completed forms are to be submitted to any Births, Deaths and Marriages (BDM) Office or approved office.
3. Providing false information to the Government is an offence under the False Information Act 2016. If you are found guilty of providing false information to the Government, you may be fined up to \$10,000 or imprisoned for a term for up to 5 years or to both. Ensure to use name as recorded in the Birth Certificate.
4. The Births, Deaths and Marriages 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.

**Part 1: Personal Details of Applicant as per Birth Certificate**

Birth Registration Number: \_\_\_\_\_ Sex:  Female  Male

Full Name as per Birth Certificate: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Place of Birth: \_\_\_\_\_

**Parents' Details:**

Mother's Full Name: \_\_\_\_\_ Father's Full Name: \_\_\_\_\_

Mother's Father's Name: \_\_\_\_\_ Father's Father's Name: \_\_\_\_\_

**Part 2: Proposed Change of Name (New Name)**

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Other Names: \_\_\_\_\_

**Part 3: Contact Details of Applicant**

Mobile: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Valid Photo Identification *(Please specify)*: \_\_\_\_\_ ID Number: \_\_\_\_\_

Email: \_\_\_\_\_ Name as per ID provided: \_\_\_\_\_

Contact Preference:  Email  Phone

**Part 4: Residential Details of Applicant**

|                              |                 |
|------------------------------|-----------------|
| Current Residential Address: | Postal Address: |
|                              |                 |
|                              |                 |

**Part 5: Declaration by Applicant (18 years 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 dollars or imprisonment for up to 5 years or to both.

Declared at \_\_\_\_\_ this \_\_\_ day of \_\_\_\_\_, 20\_\_ before me and I certify that the declaration was read over in the \_\_\_\_\_ language to the applicant who appeared fully to understand the meaning thereof.

\_\_\_\_\_  
Registrar-General/ Justice of the Peace/ Commissioner for Oaths/ Notary Public

\_\_\_\_\_  
Signature of Applicant

*Note: Please sign this Application in the presence of the Registrar-General/ Justice of the Peace/ Commissioner for Oaths/ Notary Public.*

**Part 6: Declaration by Parent(s) for child below 18 years**

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 up to 5 years or to both.

Declared at \_\_\_\_\_ this \_\_\_ day of \_\_\_\_\_, 20\_\_ before me and I certify that the declaration was read over in the \_\_\_\_\_ language to the parent(s) who appeared fully to understand the meaning thereof.

\_\_\_\_\_  
Registrar General/ Justice of the Peace/ Commissioner for Oaths/ Notary

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Signature of Parent

*Note: Please sign this Application in the presence of the Registrar-General/ Justice of the Peace/ Commissioner for Oaths/ Notary Public.*

**Part 7: Authority to release my/my child's birth certificate with new name to a third party (Optional)**

I, \_\_\_\_\_, authorise Births, Deaths and Marriages (BDM) Office to release a copy of my/my child's birth certificate with new name to \_\_\_\_\_.

\_\_\_\_\_  
Signature of applicant/ parent

\_\_\_\_\_  
Date

**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

Date: \_\_\_\_\_

If Yes, BRN: \_\_\_\_\_