

# Notification of Death for Registration

THE DEPARTMENT OF INTERNAL AFFAIRS

Te Tari Taiwhenua

BDM28 08/10

Fill this form out in black/blue pen. Please PRINT clearly in CAPITALS.

## Deceased

### 1 Name of deceased

First or given name(s)

Surname or family name

### 2 Name at birth (if different from above)

First or given name(s)

Surname or family name

### 3 Date of death

DD MM YYYY

### 4 Place of death in full

### 5 Cause or causes of death (as specified in Medical Certificate or Coroner's Authorisation)

Part I (a) Direct cause including interval between onset and death

Approx. interval between onset and death

Part I (b) Antecedent cause including interval between onset and death

Approx. interval between onset and death

Part I (c) Underlying condition including interval between onset and death

Approx. interval between onset and death

Part II Other significant contributing conditions including interval between onset and death

Approx. interval between onset and death

### 6 Name of certifying doctor

### 7 Date last seen alive by certifying doctor

DD MM YYYY

### 8 Sex of deceased

female ☐

male ☐

### 9 Date of birth

DD MM YYYY

### Age

Enter complete years (e.g. 78). If less than 1 year old use complete months (M), weeks (W), days (D), hours (H), minutes (N) (e.g. 6M).

### 10 Place of birth

Town or city

Country (if not New Zealand)

### 11 If not born in New Zealand, number of years lived here

### 12 Usual home address

Flat number (if applicable) Street number and name

Suburb or rural locality

City, town or district

Country (if not New Zealand)

### 13 Usual occupation, profession or job

### 14 Was the deceased descended from a New Zealand Māori?

Yes ☐

No ☐

Don't know ☐

### 15 Which ethnic group(s) did the deceased belong to?

Tick the box(es) that apply

NZ European ☐

Māori ☐

Samoan ☐

Tongan ☐

Cook Island Maori ☐

Niuean ☐

Chinese ☐

Indian ☐

Other such as Dutch, Japanese, Tokelauan → Please state

### 16 Date of burial, cremation or other disposal of body

DD MM YYYY

### 17 Place of burial, cremation or other disposal of body in New Zealand (or place outside of New Zealand to which body proposed to be removed)

## Living Children of Deceased

### 18 Age of each daughter

### 19 Age of each son

## Parents of Deceased

### 20 Mother's full name

First or given name(s)

Surname or family name

### 21 Mother's full name at birth (if different from above)

First or given name(s)

Surname or family name

### 22 Mother's occupation, profession or job

### \*23 Father's full name

First or given name(s)

Surname or family name

### \*24 Father's full name at birth (if different from above)

First or given name(s)

Surname or family name

### \*25 Father's occupation, profession or job



### \* Or Other Parent's details

Where the deceased was born as a result of an assisted human reproduction procedure (such as artificial insemination), the details in questions 23 to 25 should be completed as follows:

(1) If the deceased's mother was married to, or in a civil union or de facto relationship with, a man who consented to the mother undergoing the procedure, that man's details should be entered in questions 23 to 25. **Do not tick the box to the right.**

(2) If the deceased's mother was living in a civil union or de facto relationship with a woman who consented to the mother undergoing an assisted human reproduction procedure (such as artificial insemination) then tick the following box and complete the person's details in questions 23-25. Her details will be shown on the death registration and death certificates as "Other parent" (instead of "Father").

Tick this box if situation (2) applies ☐

## Relationship Details of Deceased

### 26 Relationship status at time of death (tick only one option)

Married ☐ In a civil union ☐ Marriage/civil union dissolved ☐ In a de facto relationship ☐ Spouse/partner deceased ☐ Separated from de facto partner ☐ Permanently separated (from a marriage or civil union) ☐ Never in a legal relationship ☐

### 27 Details of most recent relationship (if any)

Marriage ☐ Civil Union ☐ De facto relationship ☐

#### Place of marriage or civil union

Town or city

Country (if not New Zealand)

Age of deceased at time of marriage/civil union  years

#### Spouse/Partner: full name (when relationship formalised)

First or given name(s)

Surname or family name

Sex of spouse/partner female ☐ male ☐ Age, if living

### 28 If previously in a relationship – list details of second most recent relationship

Marriage ☐ Civil Union ☐ De facto relationship ☐

#### Place of marriage or civil union

Town or city

Country (if not New Zealand)

Age of deceased at time of marriage/civil union  years

#### Spouse/Partner: full name (when relationship formalised)

First or given name(s)

Surname or family name

Sex of spouse/partner female ☐ male ☐ Age, if living

### 29 If previously in a relationship – list details of third most recent relationship

Marriage ☐ Civil Union ☐ De facto relationship ☐

#### Place of marriage or civil union

Town or city

Country (if not New Zealand)

Age of deceased at time of marriage/civil union  years

#### Spouse/Partner: full name (when relationship formalised)

First or given name(s)

Surname or family name

Sex of spouse/partner female ☐ male ☐ Age, if living

### 30 If previously in a relationship – list details of fourth most recent relationship

Marriage ☐ Civil Union ☐ De facto relationship ☐

#### Place of marriage or civil union

Town or city

Country (if not New Zealand)

Age of deceased at time of marriage/civil union  years

#### Spouse/Partner: full name (when relationship formalised)

First or given name(s)

Surname or family name

Sex of spouse/partner female ☐ male ☐ Age, if living

## Person Notifying Death

### 31 Profession or occupation

### 33 Contact telephone number

DD MM YYYY

date

signature

### 32 Name

### 34 Business or residential address

### 35 Was the deceased a Marriage Celebrant or Civil Union Celebrant?

Yes ☐ No ☐

### 36 Was the deceased a Justice of the Peace?

Yes ☐ No ☐

### 37 Did the deceased hold an honour or award? (do not include military decorations)

Yes ☐ No ☐

name  
honour(s)  
or award(s)