



REPUBLIC OF NAURU
GOVERNMENT GAZETTE
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Nauru

G.N. No. 107 / 2018

BIRTHS, DEATHS AND MARRIAGES REGISTRATION
(FORMS) REGULATIONS 2018

SL No. 1 of 2018

Notified: []

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Cabinet makes the following Regulations under section 102(2)(a) of the *Births Deaths and Marriages Registration Act 2017*:

1 **1 Citation**

These Regulations may be cited as the *Births Deaths and Marriages Registration (Forms) Regulations 2018*.

2 **Commencement**

These Regulations are deemed to have commenced on 1st February 2018.

3 **Application to request for access to registration of birth**

For the purposes of section 10(d) of the Act, the prescribed form for an application to request access to registration of birth is set out in Form 1 of the Schedule.

4 **Application to request for access to registration of death**

For the purposes of section 10(d) of the Act, the prescribed form for an application to request access to registration of death is set out in Form 2 of the Schedule.

5 **Application to request for access to registration of marriage**

For the purposes of section 10(d) of the Act, the prescribed form for an application to request access to registration of marriage is set out in Form 3 of the Schedule.

6 **Notification of birth**

(1) For the purposes of section 12 of the Act, the prescribed form for the notification of birth to the Registrar is set out in Form 4 of the Schedule.

(2) The hospital and health practitioners shall complete the form under regulation (1) and submit to the Registrar of Births the notification within 7 days of the birth of the person.

(3) The prescribed form or any other form used for the purposes of notification of births prior to the coming into effect of this Act is repealed from 1st February 2018 and shall not be used for any official purposes.

7 **Notification of birth on aircraft or vessel**

(1) For the purposes of section 17 of the Act, the prescribed form for the notification of birth on an aircraft or vessel to the Registrar is set out in Form 5 of the Schedule.

(2) The parents, guardian, the Captain of the aircraft or the Master of the vessel shall complete the form under subregulation (1) and submit to the Registrar of Births the notification within 28 days from the date of the birth of the person.

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- (3) The prescribed form or any other form used for the purposes of notification of births on an aircraft or vessel prior to the coming into effect of this Act is repealed from 1st February 2018 and shall not be used for any official purposes.

8 **Notice of Birth**

For the purposes of the Act and these Regulations, the Notice of Birth to be published in the Gazette by the Registrar is set out in Form 6 of the Schedule.

9 **Application for registration of birth**

For the purposes of section 13 of the Act, the prescribed form for the application for registration of birth is set out in Form 7 of the Schedule.

10 **Birth Certificate**

For the purposes of the Act and these regulations, the prescribed Birth Certificate is set out in Form 8 of the Schedule.

11 **Notification of death by Director of Medical Services or health practitioners**

- (1) For the purposes of sections 35 and 40 of the Act, the prescribed form for the notification of deaths to the Registrar is set out in Form 9 of the Schedule.
- (2) The Director of Medical Services or health practitioner who notifies the Registrar under sections 35 and 40 of the Act shall complete the form under subregulation (1) and submit to the Registrar within 7 days from the date of the death of the deceased.
- (3) The prescribed form or any other form used for the purposes of notification of deaths prior to the coming into effect of this Act is repealed from 1st February 2018 and shall not be used for any official purposes.

12 **Certificate notifying a registration of death by the Registrar to funeral officiators**

For the purposes of the Act and these Regulations, the prescribed Certificate notifying a registration of death by the Registrar to a funeral officiator is set out in Form 10 of the Schedule.

13 **Certificate notifying a registration of death by the Registrar to a person other than funeral officiator**

For the purposes of the Act and these Regulations, the prescribed Certificate notifying a registration of death by the Registrar to a person other than a funeral officiator is set out in Form 11 of the Schedule.

14 **Application for registration of death**

- (1) For the purposes of section 39 of the Act, the prescribed form for an application to register a death is set out in Form 12 of the Schedule.
- (2) The person who has the right to register a death under section 38 of the Act shall complete the form under regulation (1) and submit to the Registrar within 7 days from the disposal of the human remains.

15 **Notice of Death**

For the purposes of the Act and these regulations, the Notice of Death to be published in the Gazette by the Registrar is set out in Form 13 of the Schedule.

16 **Death Certificate**

For the purposes of the Act and these regulations, the prescribed Death Certificate is set out in Form 14 of the Schedule.

17 **Application to marry**

(1) For the purposes of section 54 of the Act, the prescribed form for an application to marry is set out in Form 15 of the Schedule.

(2) The prescribed form or any other form used for the purposes of application to marry prior to the coming into effect of this Act is repealed from 1st February 2018 and shall not be used for any official purposes.

18 **Notice to Marry**

For the purposes of sections 55 and 56 of the Act, the Notice to Marry to be published in the Gazette by the Registrar is set out in Form 16 of the Schedule.

19 **Marriage Certificate**

For the purposes of the Act and these regulations, the prescribed Marriage Certificate is set out in Form 17 of the Schedule.

20 **Declaration of Marriage by marriage officer**

For the purposes of the Act and these regulations, the prescribed Declaration of Marriage is set out in Form 18 of the Schedule.

21 **Application for recognition of marriage solemnised in foreign country**

For the purposes of section 69(1) of the Act, the prescribed form for an application to the Registrar for the recognition of a marriage of a Nauruan which was solemnised in a foreign country is set out in Form 19 of the Schedule.

22 **Application for Certificate of No Impediment to Marriage**

For the purposes of section 97 of the Act, the prescribed form for an application to the Registrar for a Certificate of No Impediment to Marriage is set out in Form 20 of the Schedule.

23 **Certificate of No impediment to Marriage**

For the purposes of section 97 of the Act, the prescribed Certificate of no Impediment to marriage is set out in Form 21 of the Schedule.

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24 **Consideration of application**

For the purposes of the Act and these Regulations, the Registrar shall consider each application lodged and inform the applicant of the decision within 7 days of the date of the lodgement of the application.

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SCHEDULE

FORM 1

Section 11(1); Regulation 3

REPUBLIC OF NAURU

APPLICATION TO REQUEST FOR ACCESS TO REGISTRATION OF BIRTH

Application reference number: / 20

PART 1 – INFORMATION OF THE PERSON REQUESTING ACCESS

Surname: Given names:

Address: Telephone contact:

Email:

PART 2 – TYPE OF INFORMATION REQUESTED

Birth Information of person over 75 years

A stillbirth

PART 3 – GROUNDS FOR REQUEST [section 11(1)]

Applicant in person Guardian or immediate family

Section 11(4)

Brief explanation for the information sought to be accessed:

.....
.....
.....

PART 4 – PERSON AND / OR NATURE OF INFORMATION SOUGHT

Surname:..... Given names:.....

Date of birth or age:..... Address:.....

Name of parents (if known):

Residing district:

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PART 5 – DECLARATION BY PERSON REQUESTING ACCESS

I..... (*name of the person requesting access*) confirm that I have been informed that the information sought in this application is protected and privileged. I verify and undertake that the information sought is for the purposes as is stated above and for no other purposes. I will not provide the information supplied or accessed to any other person or persons for any ulterior or unlawful purposes.

Signature of applicant: Date: / /20

Identification of the applicant - drivers licence / passport / other

PART 6 – OFFICIAL PURPOSES ONLY

- Access to records given to the applicant atDistrict on / / 20
- Certified copy of the certificate or information supplied on / / 20
- This information was provided to (*name of recipient*) by
- (*name of the officer*).
- Identification sighted – drivers licence / passport / other
- Fee paid. Revenue receipt number:

Name of the officer: Signature:

Date: / / 20

FORM 2

Section 11(2); Regulation 4

REPUBLIC OF NAURU

APPLICATION TO REQUEST FOR ACCESS TO REGISTRATION OF DEATH

Application reference number: / 20

<p>PART 1 – INFORMATION OF THE PERSON REQUESTING ACCESS</p> <p>Surname: Given names:</p> <p>Address: Telephone contact:</p> <p>Email:</p>	
<p>PART 2 – TYPE OF INFORMATION REQUESTED</p> <p><input type="checkbox"/> Death</p>	
<p>PART 3 – GROUNDS FOR REQUEST [section 11(2)]</p> <p><input type="checkbox"/> Authorised persons (section 38) <input type="checkbox"/> Immediate Family</p> <p><input type="checkbox"/> Death of a person over 20 years or over 75 years of age <input type="checkbox"/> Section 11(4)</p> <p>Brief explanation for the information sought to be accessed:</p> <p>.....</p> <p>.....</p> <p>.....</p>	
<p>PART 4 – NATURE OF INFORMATION OF THE DECEASED</p> <p>Surname: Given names:</p> <p>Date of birth or age: Date of death: / /</p> <p>Name of parents (<i>if known</i>):</p>	
<p>PART 5 – DECLARATION BY PERSON REQUESTING ACCESS</p> <p>I.....(<i>name of the person</i>) confirm that I have been informed that the information sought in this application is protected and privileged. I verify and undertake that the information sought is for the purposes as is stated above and for no other purposes. I will not provide the information supplied or accessed to any other person or persons for any ulterior or unlawful purposes.</p> <p>Signature of applicant: Date: / /20</p> <p>Identification of the applicant - drivers licence / passport / other</p>	

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PART 6 – OFFICIAL PURPOSES ONLY

- Access to records given to the applicant atDistrict on / / 20
- Certified copy of the certificate or information supplied on / / 20
- This information was provided to (*name of recipient*) by (*name of the officer*).
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number:

Name of the officer: Signature:

Date: / / 20

FORM 3

Section 11(3); Regulation 5

REPUBLIC OF NAURU

APPLICATION TO REQUEST FOR ACCESS TO REGISTRATION OF MARRIAGE

Application reference number: / 20

PART 1 – INFORMATION OF THE PERSON REQUESTING ACCESS

Surname: Given names:

Address: Telephone contact:

Email:

PART 2 – TYPE OF INFORMATION REQUESTED

Marriage

PART 3 – GROUNDS FOR REQUEST [section 11(3)]

Applicant in person Immediate Family Marriages over 75years

Section 11 (4)

Brief explanation for the information sought to be accessed:

.....
.....

PART 4 – NATURE OF INFORMATION OF THE MARRIAGE

Husband: Surname..... Given names

Wife: Surname..... Given names

Date of marriage: / / 20

Place of marriage:

PART 5 – DECLARATION BY PERSON REQUESTING ACCESS

I.....(name of the person) confirm that I have been informed that the information sought in this application is protected and privileged. I verify and undertake that the information sought is for the purposes as is stated above and for no other purposes. I will not provide the information supplied or accessed to any other person or persons for any ulterior or unlawful purposes.

Signature of applicant: Date: / /20

- Identification of the applicant - drivers licence / passport / other

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PART 6 – OFFICIAL PURPOSES ONLY

- Access to records given to the applicant at District on / / 20
- Certified copy of the certificate or information supplied on / / 20
- This information was provided to (*name of recipient*) by
..... (*name of the officer*).
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number:

Name of the officer: Signature:
.....

Date: / / 20

FORM 4

Section 12; Regulation 6

REPUBLIC OF NAURU

NOTIFICATION OF BIRTH

Notification number: NB / 20

<u>PART 1 - DETAILS OF MOTHER OF CHILD</u>	
Surname: Given names:	
Mother's maiden name (<i>if available</i>):	
Date of birth: / /	Tribe:
Nationality: Registered District:	
<u>PART 2 - DETAILS OF FATHER OF CHILD</u> (<i>if provided to the hospital voluntarily by the mother</i>)	
Surname: Given names:	
Date of birth: / /	Tribe:
Nationality:..... Registered District:	
<u>PART 3 - DETAILS OF CHILD / CHILDREN</u> (<i>if multiple births</i>)	
Date of birth: / / 20	Place of birth:
Time of birth: (<i>am/pm</i>) Gender of child:	
Birth weight of child:	
<u>PART 4 - CERTIFICATION BY REGISTERED HEALTH PRACTITIONER / NURSE / MIDWIFE</u>	
I (<i>name of health practitioner / nurse / midwife</i>) to the best of my knowledge, information and belief certify that the information provided in this form are consistent with the information contained in the health records.	
Date: / / 20	
Signature:	
Designation of the officer:	
<u>PART 5 – OFFICIAL PURPOSES ONLY</u>	
<ul style="list-style-type: none"> • Information given on the / / 20 • Identification of informant sighted – drivers licence / passport / others 	
Name of the officer: Signature:	
Date: / / 20	

FORM 5

Section 17(1); Regulation 7

REPUBLIC OF NAURU

NOTIFICATION OF BIRTH ON AIRCRAFT OR VESSEL

Notification number: NB / 20

<u>PART 1 - DETAILS OF MOTHER OF CHILD</u>	
Surname: Given names:	
Mother's maiden name (if available):	
Date of birth: Tribe:	
Nationality:..... Registered District:	
<u>PART 2 - DETAILS OF FATHER (if provided to the Captain or Master voluntarily by the mother)</u>	
Surname: Given names:	
Date of birth: Tribe:	
Nationality:..... Registered District:	
<u>PART 3 - DETAILS OF CHILD / CHILDREN (if twins or more)</u>	
Date of birth: / / Place of birth: aircraft / vessel	
Flight / Voyage number:	
Time of birth: (am/pm) Gender of child:	
<u>PART 4 - DETAILS OF INFORMANT</u>	
I (name of Captain of aircraft / Master of vessel) to the best of my knowledge, information and belief certify that the information provided in this form are true to the best of my knowledge, information and belief.	
Date: / / 20	
Signature:	
Designation of the officer (if Captain of the aircraft / Master of vessel):	
<u>PART 5 – OFFICIAL PURPOSES ONLY</u>	
<ul style="list-style-type: none"> • Information given on the / / 20 • Identification of informant sighted – drivers licence / passport / others 	
Name of the officer: Signature:	
Date: / / 20	

FORM 6

Regulation 8

REPUBLIC OF NAURU

NOTICE OF BIRTH – GAZETTE

Gazette Notice No: / 20

TAKE NOTICE that the Registrar for Births, Deaths and Marriages has received the following notification of birth:

(a) Surname of child:

(b) Given names of child:

(c) Date of birth of child: / / 20

(d) Tribe:

(e) Nationality:

(f) Place of birth of child:

(g) Name of child's mother:

(h) Registered district of mother:

(i) Name of child's father:

(j) Registered district of father:

.....
Registrar of Births, Deaths and Marriages

Date: / / 20

FORM 7

Section 13; Regulation 9

REPUBLIC OF NAURU

APPLICATION FOR REGISTRATION OF BIRTH

Application Reference number: / 20

PERSONS WHO MAY REGISTER BIRTH

- (a) One or both parents; or
- (b) Where parents not available – a guardian.
- (c) Births must be registered within 21 days of birth.

PART 1 - DETAILS OF CHILD

Surname: Given names:

Date of birth: / /20 Gender: Place of birth:

PART 2 - PARTICULARS OF MOTHER OF THE CHILD

Surname: Given names:

Date of birth / age:

Maiden name (*if applicable*): Tribe:

Registered district: Nationality:

Occupation:

Telephone contact: Email:

PART 3 - PARTICULARS OF FATHER OF THE CHILD (*if married or voluntarily provided by the mother with the consent of the father*)

Surname: Given names:

Date of birth / age:

Tribe: Registered district:

Nationality: Occupation:

Telephone contact: Email:

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PART 4 - DETAILS OF MARRIAGE OF PARENTS OF THE CHILD (if married)

Date of marriage: / / Place of marriage:

Note: You must submit a copy of the marriage certificate.

PART 5 - DETAILS OF INFORMANT

Surname: Given names:

Address: Phone contact:

Occupation: Relationship to child:

I (name of informant) to the best of my knowledge, information and belief certify that the information provided in this form are true to the best of my knowledge, information and belief.

..... Date: / / 20
Signature of informant

PART 6 - OFFICIAL PURPOSES ONLY

- This office will not accept lodgement of this form if it is not completed in full.
- Application received on: / / 20
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number:

Birth certificate issued on: / / 20 Taken by:

Date: / / 20

.....
Registrar of Births, Deaths and Marriages

G.N. No. 107 / 2018 (Cont'd)

FORM 8

Regulation 10



REPUBLIC OF NAURU

Folio Number: /

BIRTH CERTIFICATE

DETAILS OF THE CHILD *(to be completed by the parents)*

Surname: Given names:

Date of birth: / /20 Gender:

Place of birth: Tribe:

Nationality:

DETAILS OF THE MOTHER OF THE CHILD

Surname: Given names:

Maiden name:

Age:

Occupation:

DETAILS OF THE FATHER OF THE CHILD

Surname: Given names:

Age:

Occupation:

REGISTRAR

I hereby certify that the above particulars relating to the registration of Birth are contained in the Register kept in the Registry in the Republic of Nauru.

Given under my hand and seal this day of 20 .

.....
Registrar of Births, Deaths and Marriages

FORM 9

Sections 35; Regulation 11(1)

REPUBLIC OF NAURU

NOTIFICATION OF DEATH BY DIRECTOR OF MEDICAL SERVICES OR HEALTH PRACTITIONER

Notification number: ND / 20

<u>PART 1 - DETAILS OF DECEASED</u>	
Surname: Given names:	
Date of birth / age: Gender:	
Address: Nationality: Tribe:	
Date of death: / / 20 Cause of death:	
Place of death: Time of death: (am/pm)	
<u>PART 2 - DETAILS BY HEALTH PRACTITIONER</u>	
(I) Disease or condition directly leading to death	Approximate interval between onset and death
a. due to (or as a consequence of)
Antecedent causes Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last	
b.
c.
due to (or as a consequence of)	
(II) Other significant conditions contributing to the death but not related to the disease or condition causing it	
.....
.....
<ul style="list-style-type: none"> <i>This does not mean the mode of dying e.g heart failure, respiratory failure. It means the disease, injury or complication that caused death.</i> 	

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PART 3 - CERTIFICATION BY HEALTH PRACTITIONER

I (*name of health practitioner*) to the best of my knowledge, information and belief certify that the information provided in this form are consistent with the information contained in the health records.

Date: / / 20

Signature:

Designation of the officer:

FORM 10

Regulation 12



REPUBLIC OF NAURU

Folio Number: / 20

CERTIFICATE NOTIFYING REGISTRATION OF DEATH BY THE REGISTRAR TO THE FUNERAL OFFICIATORS

PART 1

- *To be completed by the Registrar prior to the burial or cremation of a deceased person.*

I, Registrar of Births, Deaths and Marriages in the Republic of Nauru, do hereby certify the death of:

Name of deceased:

Gender:

Date of birth / Age:

Place of death:

Given under my hand this day of 20 .

PART 2

- *To be completed by the person officiating the burial or cremation.*
- *To be witnessed by 2 witnesses.*
- *This form must be submitted to the Registrar within 7 days of the burial or cremation.*

I, funeral officiator declare that I have officiated the burial / cremation of the undermentioned deceased:

Name of deceased:.....

Gender:.....

Place of bural/cremation.....

Declared on thisday of 20

Name of witness: Address of witness:

Name of witness: Address of witness:

G.N. No. 107 / 2018 (Cont'd)

PART 3 - OFFICIAL PURPOSES

Date form issued by the Registrar: / / 20

Form received by: / / 20

Burial / cremation conducted on: / / 20

Date form submitted to Registrar: / / 20

Receiving officer:

.....

Date: / / 20

Registrar of Births, Deaths and Marriages

FORM 11

Regulation 13



REPUBLIC OF NAURU

Folio Number: / 20

CERTIFICATE NOTIFYING REGISTRATION OF DEATH BY THE REGISTRAR TO A PERSON OTHER THAN A FUNERAL OFFICIATOR

PART 1

- *To be completed by the Registrar prior to the burial or cremation of a deceased person.*

I, Registrar of Births, Deaths and Marriages in the Republic of Nauru, do hereby certify the death of:

Name of deceased:

Gender:

Date of birth / Age:

Place of deceased:

Given under my hand this day of 20

PART 2

- *To be completed by the person officiating the burial or cremation.*
- *To be witnessed by 2 witnesses.*
- *This form must be submitted to the Registrar within 7 days of the burial or cremation.*

I, declare that I conducted the burial / cremation of the undermentioned deceased:

Name of deceased:

Gender:

Date of birth / Age:

Declared on thisday of 20

Name of witness: Address of witness:

Name of witness: Address of witness:

G.N. No. 107 / 2018 (Cont'd)

PART 3 - OFFICIAL PURPOSES

Date form issued by the Registrar: / / 20

Form received by: / / 20

Burial / cremation conducted on: / / 20

Date form submitted to Registrar: / / 20

Receiving officer:

.....

Date: / / 20

Registrar of Births, Deaths and Marriages

FORM 12

Section 39; Regulation 14

REPUBLIC OF NAURU

APPLICATION FOR REGISTRATION OF DEATH

Application Reference number: RD / 20

PERSONS WHO MAY REGISTER DEATHS

- (a) spouse of the deceased;
- (b) adult child of the deceased;
- (c) parents of the deceased;
- (d) adult sibling of deceased;
- (e) where deceased is a minor or still born child, parents or guardians; or
- (f) any person who knew or was living with deceased where there are no persons described in subparagraphs (a) to (e)

PART 1 - DETAILS OF DECEASED

Surname: Given names:

Age: Gender: Address:

Nationality: Tribe: Date of death: / / 20

Place of death: Date of burial / cremation: / / 20

PART 2 - DETAILS OF APPROVED PERSON OFFICIATING THE FUNERAL SERVICE

Name of person officiating funeral service:

Address:

Denomination (if religious minister):

Telephone contact: Email:

PART 3 - DETAILS OF PERSON REGISTERING THE DEATH

Surname: Given names:

Address: Phone contact:

Email: Occupation:

Relationship to deceased:

I (name of person registering death) to the best of my knowledge, information and belief certify that the information provided in this form are true to the best of my knowledge, information and belief.

..... Date: / / 20

Signature of informant

G.N. No. 107 / 2018 (Cont'd)

PART 4 - OFFICIAL PURPOSES ONLY

This office will not accept lodgement of this form if it is not completed in full.

- Application received on: / / 20
- Application received by officer:
- Fee paid. Revenue receipt number:.....
- Death certificate issued on: / / 20
- Death certificate given to:
- Identification sighted – drivers licence / passport / others

.....
Registrar of Births, Deaths and Marriages

Date: / / 20

FORM 13

Regulation 15

**REPUBLIC OF NAURU
NOTICE OF DEATH – GAZETTE**

Gazette Notice No: / 20

TAKE NOTICE that the Registrar for Births, Deaths and Marriages has received the following death notification:

- (a) Surname of deceased:
- (b) Given names of deceased:
- (c) Age:
- (d) Tribe:
- (e) Nationality:
- (f) Registered district:

.....
Registrar of Births, Deaths and Marriages

Date: / / 20

FORM 14



Regulation 16

REPUBLIC OF NAURU

Registration Number: / 20

DEATH CERTIFICATE

PART 1 - DETAILS OF DECEASED

Surname: Given names:

Age: Gender:

Address: Nationality: Tribe:.....

Date of death: / / 20 Place of death:

Date of burial / cremation: / / 20

To whom married (*if applicable*):

Occupation:

PART 2 - NUMBER OF ISSUES OF DECEASED

Males:.....

Female:

PART 3 - DETAILS OF MOTHER OF DECEASED

Surname: Given names:

Maiden name (*if applicable*):

PART 4 - DETAILS OF FATHER OF DECEASED

Surname: Given names:

PART 5 - REGISTRAR

I hereby certify that the above particulars relating to the registration of Death are contained in the Register kept in the Registry in the Republic of Nauru.

Given under my hand and seal this day of 20 .

.....
Registrar of Births, Deaths and Marriages

FORM 15

Section 54; Regulation 17(1)

**REPUBLIC OF NAURU
APPLICATION TO MARRY**

Application Reference number: MA / 20

The application must be accompanied by:

- Birth certificate of persons intending to marry;
- Identification to the satisfaction of the Registrar;
- If divorced, an order of dissolution of marriage from the court;
- Visa status if foreigner;
- In case of widow or widower, death certificate of the deceased spouse.

PART 1 - DETAILS OF INTENDED BRIDE

Surname: Given names:

Date of birth: / / Place of residence:

Tribe: District: Nationality:

Marital status:

PART 2 - DETAILS OF INTENDED GROOM

Surname: Given names:

Date of birth: / / Place of residence: Tribe:

District: Nationality:

Marital status:

PART 3 - WEDDING DETAILS

Date of engagement to marry: / / 20

Date of intended marriage: / / 20

Proposed place of solemnisation of marriage

Name of marriage officer to solemnise marriage:

Names and addresses of 2 witnesses for the marriage:
.....
.....

We and, the applicants do hereby notify our intention to marry and further declare that the information contained in this form is true to the best of our knowledge, information and belief.

..... Date: / / 20
Signature of Intended Bride

..... Date: / / 20
Signature of Intended Groom

PART 4

ENDORSEMENT BY

THE RESPONSIBLE MINISTER UNDER SECTION 54(3) OF THE ACT

Pursuant to the powers vested in me and in consultation with the Cabinet I hereby endorse / decline the Application to Marry.

..... Date: / / 20

Minister

Seal of the Minister:

PART 5

I in the presence of the witnesses hereto do take you
..... (name of the bride) to be my lawfully wedded wife.

Signature:

I in the presence of the witnesses hereto do take you
..... (name of the groom) to be my lawfully wedded husband.

Signature:

PART 6 - DETAILS OF 2 WITNESSES

Surname: Given names:
.....

Address:

Surname: Given names:
.....

Address:

G.N. No. 107 / 2018 (Cont'd)

PART 7 - DECLARATION BY MARRIAGE OFFICER

Pursuant to the powers conferred upon me by the Births Deaths and Marriages Registration Act 2017 I now pronounce you to be husband and wife.

Name of marriage officer:

Signature of marriage officer:

Place where marriage solemnised:

Date: / / 20

PART 8 - DECLARATION OF SOLEMNISATION OF MARRIAGE BY MARRIAGE OFFICER

I of, marriage officer declare that on day of 20 , I solemnised the marriage between and at District.

..... Date: / / 20

Signature of marriage officer

PART 9 - OFFICIAL PURPOSES ONLY

- This office will not accept lodgement of this form if it is not completed in full.
- Date of application: / / 20
- Date application submitted to Minister: / / 20
- Date of decision of the Minister: / / 20
- Date of the gazetting of the application to marry: / / 20
- Date of receipt of any objections to marriage: / / 20
- Date of the solemnisation of the marriage: / / 20
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number
- Application received by officer:

.....
Registrar of Births, Deaths and Marriages

Date: / / 20

FORM 16

Sections 55 & 56; Regulation 18

**REPUBLIC OF NAURU
NOTICE TO MARRY – GAZETTE**

Gazette Notice No: / 20

TAKE NOTICE that the Registrar for Births, Deaths and Marriages has received the following application for marriage:

- (a) Intended bride:
- (b) Intended bridegroom:
- (c) Date of engagement: / / 20
- (d) Date of proposed marriage: / / 20
- (f) Place of proposed marriage:
- (f) The proposed marriage has been approved by the Minister in consultation with the Cabinet on the: / / 20

A person may lodge an objection to the marriage with the Registrar within 5 days of the publication of this Notice. The Notice shall contain:- name, address, telephone contact and email of the person objecting and the grounds for such objection.

.....
Registrar of Births, Deaths and Marriages

Date: / / 20

FORM 17



Regulation 19

**REPUBLIC OF NAURU
MARRIAGE CERTIFICATE**

Registration Number: MC / 20

<u>DETAILS OF HUSBAND</u> Surname: Given names: Tribe: District: Nationality: Occupation:	<u>DETAILS OF WIFE</u> Surname: Given names: Tribe: District: Nationality: Occupation:
<u>DETAILS OF PARENTS – Husband</u> Father's name: Occupation: Mother's name: Occupation:	<u>DETAILS OF PARENTS - Wife</u> Father's name: Occupation: Mother's name: Occupation:
<u>DETAILS OF WITNESS 1</u> Surname: Given names:	<u>DETAILS OF WITNESS 2</u> Surname: Given names:
<u>DETAILS OF MARRIAGE OFFICER</u> Name of marriage officer: Date on which marriage was solemnised: / / 20 Place where marriage solemnised:	

G.N. No. 107 / 2018 (Cont'd)

REGISTRAR

I hereby certify that the above particulars relating to the registration of Marriage are contained in the Register kept in the Registry in the Republic of Nauru.

Given under my hand and seal this day of 20 .

.....
Registrar of Births, Deaths and Marriages

FORM 18



REPUBLIC OF NAURU

Regulation 20

DECLARATION OF MARRIAGE

Registration Number: MD / 20

<ul style="list-style-type: none"> <i>This form must be submitted by the marriage officer to the Registrar within 7 days of the marriage.</i> 	
<u>DETAILS OF HUSBAND</u> Surname: Given names: Tribe: District: Nationality: Occupation:	<u>DETAILS OF WIFE</u> Surname: Given names: Tribe: District: Nationality: Occupation:
<u>DETAILS OF PARENTS – Husband</u> Father's name: Occupation: Mother's name: Occupation:	<u>DETAILS OF PARENTS – Wife</u> Father's name: Occupation: Mother's name: Occupation:
I in the presence of the witnesses hereto do take you (name of the bride) to be my lawfully wedded wife. Signature:	I in the presence of the witnesses hereto do take you (name of the groom) to be my lawfully wedded husband. Signature:
<u>DETAILS OF WITNESS 1</u> Surname: Given names:	<u>DETAILS OF WITNESS 2</u> Surname: Given names:

G.N. No. 107 / 2018 (Cont'd)

DECLARATION BY MARRIAGE OFFICER

Pursuant to the powers conferred upon me by the Births Deaths and Marriages Registration Act 2017 I now pronounce you to be husband and wife.

Name of marriage officer:

Signature of marriage officer:

Place where marriage solemnised:

Date: / / 20

OFFICIAL PURPOSES ONLY

- This office will not accept lodgement of this form if it is not completed in full.
- Declaration received by officer:
- Declaration received on: / / 20
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number:

.....
Registrar of Births, Deaths and Marriages

Date: / / 20

FORM 19

Section 69(1); Regulation 21

REPUBLIC OF NAURU

APPLICATION FOR THE RECOGNITION OF MARRIAGE SOLEMNISED IN FOREIGN COUNTRY

Application Reference number: / 20

WHO MAY APPLY	
<ul style="list-style-type: none"> • A Nauruan may apply. • Marriage certificate of persons intending to apply for recognition of marriage solemnised in foreign country. • Identification to the satisfaction of the Registrar. 	
<u>DETAILS OF HUSBAND</u> Surname: Given names: Date of birth: / / Tribe: District: Nationality: Occupation:	<u>DETAILS OF WIFE</u> Surname: Given names: Date of birth: / / Tribe: District: Nationality: Occupation:
<u>PARTICULARS OF MARRIAGE</u> Date on which marriage was solemnised: / / Place of solemnisation of marriage: Country of solemnisation of marriage: Name and address of marriage officer who solemnised marriage: Name and address of witnesses to the marriage:	
<u>DECLARATION BY APPLICANTS</u> We, and (<i>the applicants</i>) of (address) certify that the information provided, is to the best of our knowledge and belief, true and correct for registration purposes. Date: / / 20 Signature of husband Date: / / 20 Signature of wife	

G.N. No. 107 / 2018 (Cont'd)

OFFICIAL PURPOSES ONLY

- This office will not accept lodgement of this form if it is not completed in full.
- Declaration received by officer:
- Declaration received on: / / 20
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number:

Date: / / 20

.....
Registrar of Births, Deaths and Marriages

FORM 20

Section 97; Regulation 22

REPUBLIC OF NAURU

APPLICATION FOR CERTIFICATE OF NO IMPEDIMENT TO MARRIAGE

Application Reference number: / 20

<u>APPLICANT TO COMPLETE</u>	
<u>DETAILS OF APPLICANT</u>	
Surname:	Given names:
Date of birth: / /	Country of citizenship:
Occupation:	Are you and intended bride / groom related?
Father's name:	Mother's name:
Name of country of intended marriage:	
Date of intended marriage in foreign country: / / 20	
<u>DECLARATION BY APPLICANT</u>	
I do solemnly and sincerely declare that the above information is correct and that I believe that there is no legal impediment to the marriage by reason of:	
<ul style="list-style-type: none"> a. my being lawfully married to b. my being within a prohibited relationship; c. a lack of real consent to the marriage on my part because: <ul style="list-style-type: none"> i. it was obtained by duress or fraud; ii. of mistaken identity of the other party or as to the nature of the ceremony performed; iii. of mental incapacity understanding the nature and effect of the marriage ceremony; or d. my not being of marriageable age. 	
.....	Date: / / 20
Signature	

G.N. No. 107 / 2018 (Cont'd)

OFFICIAL PURPOSES ONLY

- This office will not accept lodgement of this form if it is not completed in full.
- Application received by officer:
- Application received on: / / 20
- Identification sighted – drivers licence / passport / others
- Fee paid. Revenue receipt number:

Certificate of no impediment issued on: / / 20

Taken by:

Date: / / 20

.....
Registrar of Births, Deaths and Marriages

FORM 21



Regulation 23

REPUBLIC OF NAURU

CERTIFICATE OF NO IMPEDIMENT TO MARRIAGE

Folio No: / 20

I certify that (name of applicant) a Nauruan citizen was

born at (place of birth) on of (date of birth).

According to the Births, Deaths and Marriages record of the Republic of Nauru,

..... (name of applicant) there is no impediment to the solemnisation of marriage.

Given under my hand and seal this day of 20 .

.....
Registrar of Births, Deaths and Marriages