

Natural disaster replacement certificates

Birth, marriage or change of name certificate

Births, Deaths and Marriages

Who can apply

You and your immediate family can apply for free replacement birth, marriage and change of name certificates if you have been affected by a natural disaster.

Free replacement certificates are restricted to documents for you and your immediate family.

How to apply

You will need to attend a Relief/Recovery Centre to obtain a Recovery Card confirming you have suffered loss or damage as a result of a natural disaster.

You will need to attach a copy of the Recovery Card.

You will also need to provide identification documents with your application. If you don't have any identification documents, call Births, Deaths and Marriages on 131 882.

Identification (ID)

You must provide:

TWO documents from list 1; or

ONE document from list 1 and ONE document from either list 2 or 3; or

ONE document from list 2 and TWO documents from either list 1 or 3; or

THREE documents from list 3.

At least one document must show name and address and one document must show signature.

List 1

- Australian passport
- Australian driver's licence (front and back)
- Centrelink concession card

List 2

- Government employee photo ID card
- Overseas driver's licence
- Tertiary student ID card
- Overseas passport
- Aviation/maritime security ID card
- Medicare card
- Australian firearms licence
- Security guard/crowd control licence

List 3

- Bank statement
- Council rates notice
- Utility account (electricity, gas, water)
- Proof of age card
- Tenancy or lease agreement
- Motor vehicle registration papers
- Telephone/mobile account
- ATO notice of assessment
- Mortgage documents
- Australian Electoral Commission enrolment
- Seniors card
- Superannuation fund statement
- Certified academic university transcript
- Credit/debit card

Lodge your application

By post

Births, Deaths and Marriages

GPO Box 1351, Adelaide SA 5001

In person

Consumer and Business Services

Ground floor (street level)

91 Grenfell Street, Adelaide SA 5000



Please print clearly

Adult one	Which type of certificate do you require? <i>(please tick)</i>		
	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Marriage Certificate	<input type="checkbox"/> Change of Name
Current surname		Given name(s)	
Registered surname		Given name(s)	
Daytime Contact phone no.		Email address	
*Address (to mail certificate)			Postcode

**Note: If you do not have an address that certificates may be mailed to, BDM will contact you to establish an alternative.*

Date of birth	Day / Month / Year	Date of name change (if any)	Day / Month / Year
Place of birth (Town or suburb)		State of birth	
Father's surname		Father's given name(s)	
Mother's maiden surname		Mother's given name(s)	

<i>Please complete the details below if you are applying for a replacement Marriage Certificate</i>			
Date of marriage	Day / Month / Year	Place of marriage	Town or Suburb State
Groom's surname		Groom's given name(s)	
Bride's surname		Bride's given name(s)	

Adult two	Which type of certificate do you require? <i>(please tick)</i>		
	<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Change of Name	
Registered surname		Given name(s)	
Date of birth	Day / Month / Year	Date of name change (if any)	Day / Month / Year
Place of birth (Town or suburb)		State of birth	
Father's surname		Father's given name(s)	
Mother's maiden surname		Mother's given name(s)	

Please print clearly

Child one	Birth Certificate			
Date of birth	Day / Month / Year	Place of birth	Town or Suburb	State
Registered surname	Given name(s)			

Child two	Birth Certificate			
Date of birth	Day / Month / Year	Place of birth	Town or Suburb	State
Registered surname	Given name(s)			

Child three	Birth Certificate			
Date of birth	Day / Month / Year	Place of birth	Town or Suburb	State
Registered surname	Given name(s)			

Note: If you have more than three children that need a replacement certificate, attach a separate sheet with their details.

I declare that:

- I am a victim of a natural disaster;
- the information provided in this form is true and correct.

I understand that:

- giving false and misleading information is a serious offence.
- by providing these details I consent to the use and disclosure of information to assist in obtaining the requested documents.

Adult one signature	Date	Adult two signature (if applicable)	Date
	/ /		/ /

