

# Request, Reinstate or Withdraw a Non-Disclosure Direction



## Notes

### Non-Disclosure Direction

A non-disclosure direction may be requested to be placed on a person's records if the person (i.e. the subject of the record), or his or her personal representative (refer next page for description), reasonably believes that disclosure of the registered information, or any part of the registered information, **would be prejudicial to the personal safety of that person or his or her family.**

A non-disclosure direction expires after 5 years unless it is reinstated or withdrawn. A non-disclosure direction may be requested to be reinstated for further periods of 5 years if the circumstances relating to personal safety continue to exist.

Births, Deaths and Marriages will not contact you if the non-disclosure direction is about to expire. It is the responsibility of the subject or his or her personal representative to request a reinstatement of a non-disclosure direction.

If a non-disclosure direction is in place on a person's record(s), generally only the person who is the subject of the information or their personal representative, may access registered information on the record(s). If any other person attempts to access registered information when a non-disclosure direction is in place he or she will be advised that the information exists but that the information cannot be provided.

There is no fee to request, reinstate or withdraw a non-disclosure direction.

### Request or Reinstate a Non-Disclosure Direction

To request a non-disclosure direction or a reinstatement of a non-disclosure direction you must complete this form (BDM132), a General Identity Declaration form (BDM130), and any additional documentation as required if you are the person's personal representative. You must also provide one or more of the following as a certified true copy or original document:

- Protection order that is in force under the Domestic Violence Act 1995.
- Restraining order that is in force under the Harassment Act 1997.
- Police report or statutory declaration from a member of the Police to the effect that he or she believes that your personal safety, or that of your families, could be prejudiced by the disclosure of your registered information.
- Letter from either a Barrister or Solicitor, your employer, a Registered Medical Doctor, a Justice of the Peace, or the like, supporting your application on the grounds that your personal safety, or that of your families, could be prejudiced by the disclosure of your registered information.
- Statutory Declaration stating the facts and some other evidence that satisfies the Registrar-General that your personal safety, or that of your families, could be prejudiced by the disclosure of your registered information.

### Withdraw a Non-Disclosure Direction

To withdraw a non-disclosure direction you must complete this form (BDM132), a General Identity Declaration form (BDM130), and any additional documentation as required if you are the person's personal representative.

# Notes (continued)

## Personal Representative

### A “personal representative” means:

- a parent or guardian of a person, if that person (being the subject of the record) has not attained the age of 18 years and has not earlier married nor entered into a civil union or de facto relationship; or
- a person who has been granted a power of attorney or has been given written authority by the subject of the record, if the subject has attained the age of 18 years or has earlier married or entered into a civil union or de facto relationship.

### Documents the personal representative must provide (if applicable):

If the personal representative is a parent or guardian of the subject of the record and:

- the subject’s birth information is registered in New Zealand—State this in a signed letter.
- the subject’s birth information is registered outside New Zealand—Provide a certified true copy of the child’s birth certificate, which must name the parents (include a translation if not in English).
- was appointed a testamentary guardian by a deceased parent under section 26(2) of the Care of Children Act 2004 or section 7(2) of the Guardianship Act 1968—Provide a certified true copy of the deed or will.
- is a Court appointed/approved guardian—Provide a certified true copy of the Court appointment/approval.

If the personal representative has been granted a power of attorney or has been given written authority by the subject of the record, attach a certified true copy of the:

- power of attorney; or
- written authority.

## Information Made Public while Non-Disclosure Direction in Force

If you have a non-disclosure direction in force on your registered information and you make any part of your information, or any information corresponding to that part of the information, publicly available then any person may request that Births, Deaths and Marriages verify whether the information that has become publicly available matches, or is consistent with, the relevant registered information.

## To Contact Us

- Visit our website [www.bdm.govt.nz](http://www.bdm.govt.nz)
- Freephone 0800 22 52 52 (New Zealand only). If overseas phone + 64 4 463 9362
- Email [bdm.nz@dia.govt.nz](mailto:bdm.nz@dia.govt.nz)

## Post this completed and signed form, with attachments to:

Births, Deaths and Marriages  
P O Box 10-526  
Wellington 6143  
New Zealand

### Privacy

The information on this form is collected under the Births, Deaths, Marriages, and Relationships Registration Act 1995. As part of processing your request for a Births, Deaths and Marriages product or service, your identification details may be checked against other records held by Births, Deaths and Marriages or other government agencies, as authorised by law. Despite a non-disclosure direction being in place on your record(s), certain agencies and persons may access the records for certain, limited purposes.

# Request, Reinstate or Withdraw a Non-Disclosure Direction

INTERNAL AFFAIRS

Te Tari Taiwhenua

Please print clearly.

Please initial any alterations.

Tick boxes like this



## Applicant to Complete and Sign

### Applicant's Full Name

First or given names

First or given names

Surname or family name

Surname or family name

### Applicant's Address

Addressee

Flat number, street number and name

Suburb or rural locality

City or town

Postcode

Country (if not New Zealand)

### Entitlement

I am entitled to request, reinstate or withdraw the non-disclosure direction because (tick one of the following):

- ☐ I am the subject of birth, marriage, civil union and/or name change information, or
- ☐ I am the personal representative of the person who is the subject of the birth, marriage, civil union and/or name change information—Refer to Notes.

### Action Requested

I request the following action be taken (tick one of the following):

- ☐ Place a non-disclosure direction on the information, or
- ☐ The non-disclosure direction already in place be reinstated, or
- ☐ Withdraw the non-disclosure direction.

### Attach documentation (as required)

1. A General Identity Declaration form (BDM130) **must** be fully completed, signed and attached to this form.
2. Documentation that satisfies the Registrar-General that your personal safety may be at risk.
3. If you are the person's personal representative you are required to provide additional documentation—Refer to Notes.

### Applicant's Signature

### Date

Day / Month / Year

Applicant's email address

Email address

Applicant's daytime mobile or phone number

( )

*On the following pages indicate the subject's applicable records*

## Registered Information Affected by this Request

### Subject's Birth Record

Subject's Full Name

First or given names

Surname or family name

Subject's Full Name at Birth (if different from above)

First or given names

Surname or family name

Subject's Date of Birth

Day / Month / Year

Subject's Place of Birth

City or town

Country (if not New Zealand)

### Birth Records of Child(ren) of Subject

Child's Full Name

First or given names

Surname or family name

Child's Full Name at Birth (if different from above)

First or given names

Surname or family name

Child's Date of Birth

Day / Month / Year

Child's Place of Birth

City or town

Country (if not New Zealand)

Child's Full Name

First or given names

Surname or family name

Child's Full Name at Birth (if different from above)

First or given names

Surname or family name

Child's Date of Birth

Day / Month / Year

Child's Place of Birth

City or town

Country (if not New Zealand)

Child's Full Name

First or given names

Surname or family name

Child's Full Name at Birth (if different from above)

First or given names

Surname or family name

Child's Date of Birth

Day / Month / Year

Child's Place of Birth

City or town

Country (if not New Zealand)

Child's Full Name

First or given names

Surname or family name

Child's Full Name at Birth (if different from above)

First or given names

Surname or family name

Child's Date of Birth

Day / Month / Year

Child's Place of Birth

City or town

Country (if not New Zealand)

## Registered Information Affected by this Request (continued)

### Subject's Name Change Record

Subject's Full Name

First or given names

Surname or family name

Subject's Full Name at Birth (if different from above)

First or given names

Surname or family name

Subject's Date of Birth

Day / Month / Year

Subject's Place of Birth

City or town

Country (if not New Zealand)

### Subject's Marriage Record(s)

**Most Recent Marriage**— Date of Marriage

Day / Month / Year

Place of Marriage

City or town

Country (if not New Zealand)

Marriage Partner's Full Name

First or given names

Surname or family name

**Previous Marriage**— Date of Marriage

Day / Month / Year

Place of Marriage

City or town

Country (if not New Zealand)

Marriage Partner's Full Name

First or given names

Surname or family name

**Previous Marriage**— Date of Marriage

Day / Month / Year

Place of Marriage

City or town

Country (if not New Zealand)

Marriage Partner's Full Name

First or given names

Surname or family name

### Subject's Civil Union Records

**Most Recent Civil Union**— Date of Civil Union

Day / Month / Year

Place of Civil Union

City or town

Civil Union Partner's Full Name

First or given names

Surname or family name

**Previous Civil Union**— Date of Civil Union

Day / Month / Year

Place of Civil Union

City or town

Civil Union Partner's Full Name

First or given names

Surname or family name

**Previous Civil Union**— Date of Civil Union

Day / Month / Year

Place of Civil Union

City or town

Civil Union Partner's Full Name

First or given names

Surname or family name

Note: Continue on a separate page if necessary

# General Identity Declaration

INTERNAL AFFAIRS

Te Tari Taiwhenua

Reference number 

## Warning

It is an offence, punishable by imprisonment and/or a fine of up to \$10,000, to make a false statement to obtain a certificate, printout or a source document, or to provide any means of identification knowing that it is false or is suspected to be forged or falsified.

## Instructions

If you have any questions or you are unsure about how to complete this form please contact us ☎:

- Within New Zealand Freephone 0800 22 77 77
- Outside New Zealand phone +64 4 463 9362

1. The applicant must fully complete both Parts A and B
2. Part C must be completed by any other person 16 years of age or older

## Part A My Details (as the applicant)

### Current name

Surname

First names

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

Surname at birth (if different from above)

First names at birth (if different from above)

### Place and Date of birth

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

Date of birth

D	D	M	M	Y	Y	Y	Y
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Your daytime phone number (daytime) ☎

Your email address ✉

## Part B My declaration (the applicant must complete)

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

Signature

Date signed

D	D	M	M	Y	Y	Y	Y
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If applying on behalf of a company state their name below and include an original signed request on letterhead

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

## Part C Referee's declaration (any other person 16 years of age or older must complete)

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

Signature of referee

Date signed

D	D	M	M	Y	Y	Y	Y
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Full name of referee

Phone number of referee ☎

Contact address of referee ✉

**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 and Marriages or other government agencies, as authorised by law.

[4 January 2012]