



Death Registration

When a death occurs there is a legal obligation to register the death with The Registrar of Births, Deaths and Marriages.

We will take care of all the statutory forms for you, including the Death Registration Form, Application for a Death Certificate and Application for burial or cremation.

What we need from you are the following details of your deceased loved one;

Deceased person's details

Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other

Surname Given names

Gender ☐ M ☐ F Date of birth / /

Residential address

Suburb / Town State Post code

Aboriginal origin ☐ Yes ☐ No Torres Strait Islander ☐ Yes ☐ No

Place of birth – Suburb / Town

State / County Country

Date moved to Australia / / – or, if unknown; approx. years spent here in Australia

Profession or occupation

Deceased person's parents

Father's name

Father's main occupation

Mother's full maiden name

Mother's occupation

Marital status

☐ Single ☐ Married ☐ Divorced ☐ Widow/er ☐ De Facto

Details of marriage(s) if applicable

1. Place of marriage Date / /

Spouse: Given names

Surname at marriage

2. Place of marriage Date / /

Spouse: Given names

Surname at marriage

3. Place of marriage Date / /

Spouse: Given names

Surname at marriage

Children of deceased

	Given Name	Surname	D.O.B	Male	Female	Living	Dec.
1.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	/ /	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Person(s) supplying information (executor or NOK)

Name

Address

Phone (H) (Mob.)

Email

Relationship to deceased

This person is the executor ☐ Yes ☐ No

If 'No'

Executor name

Address

Phone (H) (Mob.)

Email

If the deceased person wished to be buried, did they own a grave site? ☐ Yes ☐ No

Name of cemetery

Type of grave

Location if known

Deed-holder

Deed-holder address

If the deceased person held the deed to a grave site, please note that the deed will be passed down to next of kin who can authorize proceedings for burial of the deceased.