

**APPLICATION TO REGISTER A DEATH ABROAD OF A
PERSON WHO HAS DISAPPEARED****Form 2 - ADD***Registration of Deaths Abroad Act 1984 (C'wlth)*
*Registration of Deaths Abroad Regulations 1985 (C'wlth)***IMPORTANT INFORMATION**

This form can be used to register the death of a prescribed person who has disappeared from an Australian aircraft while it was in flight, an Australian ship while it was at sea, a flying craft (other than an Australian aircraft) while it was in flight on an Australian flight, or a ship (other than an Australian ship) while it was at sea on an Australian voyage. A prescribed person means a person who is an Australian citizen or, ordinarily resides in Australia or, is in receipt of a pension, allowance or benefit under the Social Security Act 1991 (C'wlth) or, is in receipt of a pension, allowance or benefit under the Veterans' Entitlements Act 1986 (C'wlth) or is receiving weekly amounts of compensation under the Military Rehabilitation and Compensation Act 2004. Registration of a death abroad is not compulsory.

To enable registration of a death abroad certain documents need to be lodged with this form to support the application including missing person reports to police, outcomes of coronial inquests or reports or logs from aircraft or ship crew. If any documentation is in a foreign language an official English translation is required. All original documentation supplied with the application form will be returned to the applicant if requested. Applicants are also required to provide 3 forms of identification upon application of which at least one must display the applicant's current residential address and signature.

There is no fee to lodge an application to register a death abroad. However a fee does apply if a certificate is required. For further information and forms to apply for a certificate please visit our website <https://www.accesscanberra.act.gov.au>

PRIVACY INFORMATION

The Births, Deaths and Marriages Registration Act 1997 authorises the Registrar-General to collect the information required by this form. The Registrar-General prevents any unreasonable intrusion into a person's privacy in accordance with the Information Privacy Act 2014. The Registrar-General may provide identifiable information to law enforcement organisations and authorised organisations that have legal authority to request information under prescribed circumstances. Documents provided as proof of identity may have their authenticity verified through the National Document Verification System (DVS). Documents issued by this office may also be verified by external agencies using DVS.

INSTRUCTIONS FOR COMPLETION

- If completing this form by hand please use black pen only.
- This office will not accept lodgement of this form if it is not completed in full.
- Any alteration to information provided on this form must be struck through with black pen and substitute information must be clear and all parties must sign in the margin. Do not use white out.
- If you are lodging this application in person you must supply original documentation.

CONTACT INFORMATION**Email:**
bdm@act.gov.au**Post:**
Access Canberra
Births, Deaths and Marriages
GPO Box 158
Canberra, ACT 2601**In Person:**
Please visit
www.act.gov.au/accessCBR
Or call **132281** to find an
Access Canberra Service Centre**TRANSLATING AND INTERPRETING SERVICE**

If you require further information or require advice, a language assistance service is available by phoning the Translating and Interpreting Service (TIS) on 13 14 50.

**APPLICATION TO REGISTER A DEATH ABROAD OF A
 PERSON WHO HAS DISAPPEARED**
Form 2 - ADD
Registration of Deaths Abroad Act 1984 (C'wlth)
Registration of Deaths Abroad Regulations 1985 (C'wlth)

Phone number		Registration Number (Office use only)	
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PARTICULARS OF DECEASED			
Surname		Given Name(s)	
Date last seen alive	Time last seen alive	Place last seen alive	
/ /	am/pm		
Date of Birth	Sex	Place of Birth	
	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unspecified <input type="checkbox"/> Indeterminate <input type="checkbox"/> Intersex		
Nationality		Last known occupation	
Marital status		Surname of spouse (if applicable)	
<input type="checkbox"/> Domestic Partnership <input type="checkbox"/> Civil Partnership <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
Former name of spouse (if applicable)		Given Name(s) of spouse (if applicable)	
Children of the deceased (Given names in full)	Date of Birth	Sex	Deceased
	/ /	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Unspecified <input type="checkbox"/> Indeterminate <input type="checkbox"/> Intersex	<input type="checkbox"/> No <input type="checkbox"/> Yes
	/ /	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Unspecified <input type="checkbox"/> Indeterminate <input type="checkbox"/> Intersex	<input type="checkbox"/> No <input type="checkbox"/> Yes
	/ /	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Unspecified <input type="checkbox"/> Indeterminate <input type="checkbox"/> Intersex	<input type="checkbox"/> No <input type="checkbox"/> Yes
	/ /	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Unspecified <input type="checkbox"/> Indeterminate <input type="checkbox"/> Intersex	<input type="checkbox"/> No <input type="checkbox"/> Yes
Mother/Birth Parent Surname	Mother/ Birth Parent Former Surname (if any)	Mother/Birth Parent Given Name(s)	
Father/Other Parent Surname	Father/Other Parent Former Surname	Father/Other Parent Given Name(s)	

Details of Residence	
Usual place of residence	
Where person resided in Australia at any time, the address/es at which the person resided	Period of residence

PARTICULARS OF BENEFITS PAYABLE BY COMMONWEALTH

Grounds (if any) on which the applicant has reason to believe that the person: (a) was an Australian citizen (b) ordinarily resided in Australia or in an external Territory of Australia (c) was in receipt of a pension, allowance or benefit under the *Social Security Act 1991* (d) was in receipt of a pension, allowance or benefit under the *Veterans' Entitlements Act 1986* or the *Military Rehabilitation and Compensation Act 2004*.

(a)

(b)

(c)

(d)

If the deceased was in receipt of a salary, pension, allowance or other benefit from the Commonwealth or an authority of the Commonwealth, details of that benefit.

PARTICULARS OF WITNESSES

Surname of witness who last saw person alive	Given Name(s) of witness who last saw person alive
Address of witness who last saw person alive	

Surname of other witness who last saw person alive	Given Name(s) of other witness who last saw person alive
Address of other witness last saw person alive	

Surname of other witness who last saw person alive	Given Name(s) of other witness who last saw person alive
Address of other witness last saw person alive	

PARTICULARS OF DISAPPEARANCE

Such particulars of the time at which, the date on which, and the circumstances in which, the person disappeared as are known to the applicant

Relationship to deceased	If not related, period applicant knew the deceased	
If not related, grounds which the applicant knows the identity of the person who has disappeared		
Has an application for registration of death been made to any other authority and if so which authority		
If an application for registration of deaths was made to another authority, was the application refused		

DECLARATION BY APPLICANT

I,		being a	
	(full name)		(occupation)
of			
	(address)		
Email Address:			
<p>I certify that I have read this form thoroughly and that the particulars provided are correct. I understand that a person who intentionally makes a false statement in a declaration is guilty of an offence under the Crimes Act and I believe that the statements in the declaration are true in every particular.</p>			
Signature:		Date:	