Allocated Identity Number:

NOTICE OF BIRTH

[Births and Deaths Registration Act 51 of 1992]

Regulation No 5

To be completed in full and submitted at the Department of Home Affairs' office or to a South African embassy or consulate. The form to be completed in black ink with **BLOCK LETTERS**. Please mark with ☑ the CORRECT box, where required. **Applications that are not legible shall not be accepted.**

Date of application Y Y Y Y M M D D ☐ Registration within **30 Days** ☐ Registration after **30 Days**

A. DETAILS OF THE CHILD

Surname

Forenames in full

Date of birth Y Y Y Y M M M M M M M M M D D *(write month in full)* Gender:

Place of birth: City/Town Province

Country of birth

Are the parents of the child married to each other? If Yes, nature of marriage ☐ Civil ☐ Customary ☐ Civil Union ☐ Religious: Specify

Date of marriage Y Y Y Y M M D D *If Yes, enclose a certified copy of the marriage certificate*

COMPULSORY SECTION: Reasons for registering after 30 days as per section 9(1)

B. DETAILS OF FATHER (PARENT A)

Identity number (passport if foreigner) Date of birth Y Y Y Y M M D D

Present surname

Maiden surname

Forenames in full

Place of birth: City/Town Country of birth

Citizenship Permanent/Temporary permit no.

C. DETAILS OF MOTHER (PARENT B) (In the case of Civil Union this section must be completed by the natural mother)

Identity number (passport if foreigner) Date of birth Y Y Y Y M M D D

Present surname

Maiden surname

Forenames in full

Place of birth: City/Town Country of birth

Citizenship Permanent/Temporary permit no.

D. ACKNOWLEDGEMENT OF PATERNITY OF A CHILD BORN OUT OF WEDLOCK

I hereby declare that I am the biological father of the child

Initials and surname	*Signature*

Identity number (passport if foreigner)

Date Y Y Y Y M M D D

Mother's consent to the acknowledgement of paternity

Initials and surname	*Signature*

Identity number (passport if foreigner)

Date Y Y Y Y M M D D

E. DETAILS OF THE LEGAL GUARDIAN/SOCIAL WORKER*

***Compulsory if notice is not given by the parent**

Identity number (passport if foreigner*) Date of birth Y Y Y Y M M D D

Social Workers Case No:

Surname

Forenames in full

Place of birth Country of birth

Residential address Street

Town/Village Province

Telephone no., incl. area code Cell phone no. Postal code

Citizenship Permanent/Temporary permit no.

F. DECLARATION

I, _____, hereby declare that the information supplied is to the best of my knowledge and belief, true and correct, I understand that a false statement is punishable under section 31 of the Births and Deaths Registration Act of 1992.

Informant

Initials and surname	*Signature*

Date Y Y Y Y M M D D

Place

Relationship to the child: ☐ Father (Parent A) ☐ Mother (Parent B) ☐ Legal guardian ☐ Social worker

G. FOR OFFICIAL USE ONLY - OFFICE OF ORIGIN

Office stamp - Office of origin

NOTICE OF BIRTH RECEIVED BY:

Identity number

Surname

First name

Persal number

Stat Birth

I	O	S	M

DOCUMENTS SUBMITTED WITH THIS APPLICATION: PLEASE TICK ☑

Birth Registration within 30 Days:

- ☐ Confirmation of Birth
- ☐ Certified copy of Father's/Parent A's ID document (if applicable)
- ☐ Certified copy of Mother's/Parent B's ID document
- ☐ Certified copy of Legal Guardian/Social Worker's ID document
- ☐ Certified copy of Marriage Certificate of parents (if married)
- ☐ BI 1658 if married religiously i.e. Moslem, Hindu
- ☐ Medical Report: Same Sex Parents
- ☐ Certified copy of Social Worker's Registration Certificate

Birth Registration after 30 Days, additional documents:

- ☐ Proof of Paternity

If foreign birth, additional documents:

- ☐ Certified copy of the Foreign birth certificate of the child
- ☐ Citizenship determination form BI-529 (SA Parent)
- ☐ Citizenship determination form BI-529 (Child)

Online verification performed and printouts attached for following persons:

☐ Father (Parent A) ☐ Mother (Parent B) ☐ Legal guardian ☐ Social worker

Date Y Y Y Y M M D D Signature _____

H. APPLICATION VERIFIED

Date Y Y Y Y M M D D

Initials and surname _____

I hereby declare that I have verified the application and registration

Signature _____

Identity number

Persal number