

STATUTORY DECLARATION

Re: Correction of Error or Omission in Registration

Please read the instructions and documentation requirements on the reverse.

APPLICANT'S INFORMATION			
Surname	Given Names	Contact Phone Number (with Area Code)	
Mailing Address		Your Relationship (to the person named in the event)	
City, Prov/State, Country			Postal Code

Change to Birth	AS CURRENTLY REGISTERED		
	Event Surname (if married woman give maiden/birth surname)	Given Name(s)	Sex
	Date of Birth <small>Month Day Year</small>	Place of birth (City, Town or Village)	BRITISH COLUMBIA
	<u>Surname</u> of Father/Co-Parent	Given Name(s)	Birthplace of Father/Co-Parent (City, Prov/State, Country)
	<u>Maiden Surname</u> of Mother	Given Name(s)	Birthplace of Mother (City, Prov/State, Country)

Change to Marriage	AS CURRENTLY REGISTERED			
	<u>Surname</u> of Party/Groom	Given Name(s)	Sex	Birthplace of Party/Groom (City, Prov/State, Country)
	<u>Surname</u> of Party/Bride (maiden surname of bride)	Given Name(s)	Sex	Birthplace of Party/Bride (City, Prov/State, Country)
	Date of Marriage <small>Month Day Year</small>	Place of Marriage (City, Town or Village)	BRITISH COLUMBIA	

Change to Death	AS CURRENTLY REGISTERED		
	<u>Surname</u> of Deceased	Given Name(s)	Sex
	Date of Death <small>Month Day Year</small>	Place of Death (City, Prov/State, Country)	BRITISH COLUMBIA

CORRECTION OF ERROR OR OMISSION
The following items of information are incorrect or missing:
The items listed above, should read as follows:

DECLARATION	
<p>I desire the correction(s) as shown above to be made pursuant to the <i>Vital Statistics Act</i>. I have enclosed all certificates in my/our possession that relate to this event and understand that they will not be returned on completion of this alteration/amendment, and I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.</p>	
Declared before me at _____ in the Province of British Columbia, this _____ (Day) day of _____ (Month), _____ (Year)	_____ <i>*(signature mother or declarant)</i> _____ <i>*(signature of father/co-parent or declarant)</i> _____ <i>Notary Public, or Vital Statistic District Registrar of Births, Deaths, and Marriages, Commissioner for Taking Affidavits, etc.</i>
<p><small>* Please note: The signature of both parents is required for a change to the birth record of a minor.</small></p>	

Corrections of Error or Omission in Registration

To make the required change, the following is required:

1. Completion of this form, "Statutory Declaration Re: Error or Omission in Registration".

Please note: When completing a Statutory Declaration, the signature(s) must be witnessed by a person authorized for taking oaths and affidavits. Legislation allows those who are specifically authorized to witness signatures to charge a fee for this service. You may wish to check with the office in advance to determine this fee.

2. Provide proof to support the requested change. Acceptable evidence would be:

- * Certified copy of Birth certificate
- * Certified copy of Canadian citizenship papers/card
- * Certified copy of Canadian Resident card
- * Certified copy of Landed immigrant papers
(not acceptable if issued for travel purposes only)

3. Payment of the legislated fee for a correction or omission in registration.*

4. The issuance of a certificate reflecting a correction may be ordered following the change.

Please note: All previous issued certificates must be returned to the Vital Statistics Agency with this request for an amendment or correction to a record as the certificate(s) will no longer be valid, following the amendment.

SERVICES/FEEES	
<p><i>* The fee for the Correction of Error or Omission in Registration is \$27.00 and does not include a new certificate. If you wish to order new certificate(s) please complete the following and add the additional payment to the total. The birth certificate is available in 2 versions. One contains personal information only, the other also includes parental information. Both are the same size (12.5cm x 17.6cm). The two versions are mailed separately.</i></p>	
<p>Regular Service - \$27.00 per certificate (average 5 to 7 days processing time) <i>All services, other than rush services, will be mailed.</i></p> <p><input type="checkbox"/> Certificate (Individual Information only) <input type="checkbox"/> Certificate (Includes Parental Information)</p> <p><input type="checkbox"/> Registration Photocopy, Regular Service - \$50.00 per photocopy</p>	<p>Rush Service* - \$60.00 per certificate (24 hours processing time) <i>*Rush service is only available for certificate production. 24 hour service indicates in-office processing time. Courier time is additional.</i></p> <p><input type="checkbox"/> Certificate (Individual Information only) <input type="checkbox"/> Certificate (Includes Parental Information)</p> <p><input type="checkbox"/> Registration Photocopy, Rush Service - \$60.00 per photocopy</p>
Payment Methods	
<p><input type="checkbox"/> Cheque <input type="checkbox"/> Money Order <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express</p> <p>Postdated cheques not accepted</p> <p>Interac/Cash payment may be made in person at one of our four offices. Cheque or money order made payable to the Minister of Finance.</p>	
<p>Credit Card # _____ Expiry date _____</p> <p style="text-align: right; margin-right: 100px;"><small>PRINT Card holder name as shown on Credit Card</small></p>	
<p>AMOUNT ENCLOSED FOR:</p> <p>Correction \$27.00</p> <p>New Certificate _____</p> <p>Total Amount Enclosed _____</p>	
<p>_____ Card holder signature</p>	

MAILING ADDRESS AND TELEPHONE NUMBERS FOR SERVICE OR GENERAL INFORMATION

Vital Statistics Agency
PO Box 9657 Stn Prov Govt
Victoria BC V8W 9P3
Location: 818 Fort Street, Victoria BC
General Inquiries: 250 952-2681

OTHER VITAL STATISTICS AGENCY OFFICES

Vital Statistics Agency
250 - 605 Robson Street
Vancouver BC V6B 5J3

Vital Statistics Agency
101 - 1475 Ellis Street
Kelowna BC V1Y 2A3

Vital Statistics Agency
433 Queensway Street
Prince George BC V2L 5M2

Phone: 250-712-7562

Phone: 250-565-7105

The information on this form is collected under the authority of the *Vital Statistics Act* (RSBC 1996, c479 s 3(1)). The information provided will be used to correct the registration, produce certificates and provide statistical and demographic information required for the administration of the Health Care system. If you have any questions about collection and use of this information contact a Vital Statistics Client Service Representative at 250 952-2681, or write to the mailing address given above. Personal information will be used and disclosed in accordance with the privacy protection provisions of the *Freedom of Information and Protection of Privacy Act*.