ORDER OF SERVICE	FORMS TO LINK
BIRTH REGISTRATION AND 1ST PASSPORT	DHA-288, DHA-288A, DHA-288C, DHA-73, DHA-529, SVP-109
FIRST ID DOCUMENT AND 1ST ADULT PASSPORT	DHA-7, DHA-529, CMO-217, SVP-109
RE-ISSUE OF ID DOCUMENT	DHA-529, SVP-109
EMERGENCY TRAVEL DOCUMENT	DHA-73, DHA-529, SVP-109
CONSENT FROM PARENTS FOR CHILD PASSPORT	DHA-73, CMO-5
REGISTRATION OF MARRIAGE	CMO-2
REGISTRATION OF DIVORCE	CMO-3
REGISTRATION OF DEATH	None
APPLICATION FOR BIRTH CERTIFICATE (UNABRIDGED)	DHA-154
APPLICATION FOR MARRIAGE CERTIFICATE	DHA-130
APPLICATION FOR DEATH CERTIFICATE	DHA-132
CERTIFICATE OF NO IMPEDIMENT	CMO-4
DETERMINATION OF SOUTH AFRICAN CITIZENSHIP	DHA-529, SVP-109
RETENTION OF SOUTH AFRICAN CITIZENSHIP	DHA-1664, DHA-529
RESUMPTION OF SOUTH AFRICAN CITIZENSHIP	DHA-1666, DHA-529
RENUNCIATION OF SOUTH AFRICAN CITIZENSHIP	DHA-246, DHA-529
CHANGE OF FORENAMES FOR MAJOR	DHA-85, DHA-154, DHA-529, SVP-109
CHANGE OF FORENAMES FOR MINOR	DHA-85, DHA-154, DHA-529, SVP-109
CHANGE OF SURNAME FOR MAJOR	DHA-196, DHA-529, DHA-154, SVP-109
CHANGE OF SURNAME FOR MINOR	DHA-193, DHA-529, DHA-154, SVP-109
IMPORTANT INFORMATION	None
AMENDMENTS OF PERSONAL PARTICULARS	None



REPUBLIC OF SOUTH AFRICA **DEPARTMENT OF HOME AFFAIRS**

APPLICATION FOR ALTERATION OF FORENAME IN TERMS OF SECTION 24 OF THE BIRTHS AND DEATHS REGISTRATION ACT, 1992

STIPULATION OF THE ACT:

Section 24 reads as follows:

- 24. (1) Any parent of a minor, or he himself if he is a person of age, may apply to the Director-General for the alteration of his forename under which his birth is registered, and the Director-General may alter such forename accordingly in the prescribed manner.

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REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HOME AFFAIRS

APPLICATION FOR ALTERATION OF SURNAME OF MINOR IN TERMS OF SECTION 25 OF THE BIRTHS AND DEATHS REGISTRATION ACT, 1992

* Delete whichever is not applicable
I, (forenames in full and surname)
identity number
the *father/mother/guardian (forenames in full and surname of minor)
born at (place of birth)
on (date of birth)
identity number/birth entry number
do hereby apply that his/her surname be altered to
which is my surname, or to the surname because—
my child was born out of wedlock and I married someone else other than the natural father of my child,
the marriage with the father of my child has been dissolved through divorce/death and I married again,
as a widow/divorcee I resumed my maiden name/previous married surname,
the birth of my child born out of wedlock has been registered under the surname of his natural father,
I am the guardian of the minor (for the purpose of this section "guardian" includes any person who has in law or in fact the custody or control of a minor).
Please indicate with an X the reason which is applicable. Should none of the above-mentioned reasons be applicable, state the reason below:
Signature of *father/mother/guardian Date
Address
Telephone number Telephone code
FOR DEPARTMENTAL USE



DEPARTMENT: HOME AFFAIRS

REPUBLIC OF SOUTH AFRICA

APPLICATION FOR AUTHORITY IN TERMS OF SECTION 26 OF THE BIRTHS AND DEATHS REGISTRATION ACT, 1992, TO ASSUME ANOTHER SURNAME

I hereby apply for	authority to assume the su	rname			
and furnish the foll	owing reason for my applic	cation			-
PARTICULARS OF	APPLICANT:		- 24	'S	
Present surname					
Forenames in full					
Identity number				Date of birth	
Place of birth					
Postal address					
					Postal code
Telephone number]	Telephon	e code	
I also wish to inclu	de in my application my wi	fe and mino	r children, v	whose particulars of birth	n are as follows:
Maiden name					
Identity number				8	JE. 9
Forenames in full					
CHILDREN:					
Forenames	in full and surname	Date o	of birth	Place of birth	ldentity number/ Birth entry number
					187
	9				8 8
			*1		
	- K			Consent of wife (if appl	licable)
	ii.			*	8 Te
· · · · · · · · · · · · · · · · · · ·	Signature of applicant			Signa	ture of wife
Date			ž.		
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REPUBLIC OF SOUTH AFRICA DEPARTMENT OF HOME AFFAIRS



YYY

Date

Signature

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APPLICATION FOR BIRTH CERTIFICATE

[Births and Deaths Registration Act 51 of 1992] 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. Please select below which certificate is required: Certified copy of Birth Register (vault copy) **Unabridged Certificate** Handwritten abridged certificate **Abridged Certificate** Please provide reasons for applying for this certificate [compulsory in terms of Section 29 (2) 9 (b) of the Act]: A. PARTICULARS OF PERSON Identity number Birth entry number Date of Birth DD (write month in full) Surname Previous/Maiden surname Forenames (in full) Place of birth: City/Town Country of Birth District/Province of Birth **B. PARTICULARS OF FATHER/ PARENT A** Identity number Surname Previous/Maiden surname Forenames (in full) Place of birth: City/Town Country of Birth District/Province of Birth C. PARTICULARS OF MOTHER/ PARENT B Identity number Surname Previous/Maiden surname Forenames (in full) Place of birth: City/Town District/Province of Birth Country of Birth D. PARTICULARS OF APPLICANT Identity number Surname Forenames (in full) Residential address: Street Town/Village District/Province Postal code Cell phone no. Telephone no., incl. area code Legal guardian Relationship to the person concerned: Father/Parent A Mother/Parent B Social Worker or Authority officer, provide case number: Other, please specify (The applicant), hereby declare under oath that the information submitted is to the best of my knowledge and belief true and correct in case it is not true, I shall be guilty of an offence and on conviction liable to a fine or imprisonment for a period not exceeding five years of to both such fine and such imprisonment (Section31(1)(b) of Act 51 of 1992) Signature of Applicant: E. FOR OFFICIAL USE ONLY DOCUMENTS SUBMITTED: PLEASE TICK APPLICATION RECEIVED BY Original ID document of applicant was presented Identity Number Power of Attorney Surname Payment received, if applicable Forenames in full Office stamp - OFFICE OF ORIGIN Persal No.

DEPARTMENT: HOME AFFAIRS

REPUBLIC OF SOUTH AFRICA

DETERMINATION OF CITIZENSHIP STATUS

E-MAIL ADDRESS:

INFORMATION TO BE FURNISHED IN FULL IN ORDER TO ASSIST IN DETERMINING YOUR CITIZENSHIP UNDER THE SOUTH AFRICAN CITIZENSHIP ACT, 1995 (ACT 88 OF 1995), WHICH CAME INTO OPERATION ON 6 OCTOBER 1995

A.	PE	RSONAL PARTICULARS
1.	SUI	RNAME 2. MAIDEN NAME
3.	FO	RENAMES (in full)
4.	DA	TE OF BIRTH 5. PLACE OF BIRTH
6.	IDE	ENTITY NUMBER
7.	If bo	om outside South Africa, please state—
	(a)	Date on which you first entered South Africa for permanent residence
	(b)	The period(s) (dates) of your residence in South Africa
	(c)	Number of immigration permit and date of issue
	(d)	Number of certificate of naturalisation and date of issue
8.	If bo	orn in Namibia, please state your permanent residential address as on 1990-03-21
9.		ou were absent from South Africa state—
	(a)	Date(s) of your departure
	(b)	Reason(s) for your departure
	(c)	The date on which you returned to South Africa permanently
10.		ticulars in respect of foreign citizenship:
		Citizenship acquired (country) (b) Date and place of acquisition
	(c)	Means of acquisition of foreign citizenship, i.e. marriage, naturalisation, descent or registration? (Please attach copy/proof
	(-/	regressive to a contrate manufacture of the first of the
	(d)	thereof) Did you apply for the retention/re-instatement of South African citizenship? YES/NO. If YES, attach a copy of the relevant certificate.
: 11.		e of marriage of your parents12. Place of marriage of your parents
В.		INITIAL STATUS IN THE STATE OF
1.	Plea	ase furnish the following particulars in respect of your spouse: (b) MAIDEN NAME
	(a)	OCT II VIII C
	(c)	FORENAMES (in full)
	(d)	DATE OF BIRTH(e) PLACE OF BIRTH
	(f)	IDENTITY NUMBER OF YOUR SPOUSE.
	(g)	Date on which he/she entered South Africa for the first time for permanent residence
	(h)	Period(s) (dates) of residence in South Africa
	(i) it	Date of your marriage(j) Place
4	(k)	If applicable, the date of your husband's/wife's death or your divorce
	m	Nationality of your spouse

(Э. Б	FAT	HER'S PARTICUL	.ARS															DHA-5	29
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	(b)	P	eriod(s) (dates) of her	residenc	e in S	outh Afr	ica													Υ.
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