



## JAMAICAN HIGH COMMISSION

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### **APPLICATION FOR THE CORRECTION OF ERRORS OR ADDITION OF INFORMATION ON JAMAICAN VITAL RECORDS**

The Office of the Registrar General (ORG), formerly Registrar General's Department is the only authority in Jamaica which is responsible for registering vital events such as births, stillbirths, deaths, adoptions, marriages, and deed polls. It is also Jamaica's sole secure repository of these records.

An application can be made to the ORG to correct errors or add information on birth, marriage or death certificates. The certificates, once produced, will be mailed to the address provided on the application form.

**Note:** The process may be delayed if the required information is not provided or if the ORG needs to conduct a search.

#### **FEES AND PROCESSING TIMES**

Payment should be made via International Money Order made payable to the Registrar General's Department based on the service selected from the list below (**Do not send cash in the mail**):

- 7 to 10 business days – CA\$130
- 4 to 6 weeks service – CA\$70

The application should be mailed directly to:

**Office of the Registrar General/Registrar General's Department**

**Twickenham Park, St. Catherine**

**Jamaica**

THE BIRTHS AND DEATHS REGISTRATION ACT

**CORRECTION OF ERROR (BIRTH) APPLICATION**

I NEED  (# of copies) of the BIRTH certificate for the following individual:

First Name of Child	Middle Name(s)	Surname
Date of Birth (dd/ mm/ yyyy)	Sex of Child:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Place of Birth (Hospital Name or Home Address)	(Parish of Birth)	(District of Birth)
Birth entry number	Date of Registration (dd/ mm/ yyyy)	
First Name of Mother	Middle Name(s)	Surname (Maiden Name)
First Name of Father	Middle Name(s)	Surname

**APPLICANT'S INFORMATION**

Full Name:	TRN:
Street Address/ Town/City, Zip Code, Country:	
Relationship to individual:	Email Address:
Reason for applying (please tick): <input type="checkbox"/> Driver's licence <input type="checkbox"/> Passport <input type="checkbox"/> Visa <input type="checkbox"/> Other	Telephone number: _____ (cell) _____ (home)    _____ (work)
Signature of Applicant:	Date of Application:



## Statutory Declaration Form for Correction of Error (Declarant 1)

This Declaration is made to correct an error on a **BIRTH Certificate**.

This certificate belongs to: \_\_\_\_\_  
(State full name here)

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Registration Birth Entry Number: \_\_\_\_\_

Place of REGISTRATION: \_\_\_\_\_  
Parish District

Where is the error located on the certificate (line #)?	What is the error?	What should the correction be?

State the reasons for the error:

[Empty rectangular box for stating reasons for the error]

That I wish to amend any other errors cited by the Registrar General's Department (RGD) after discussion with RGD. Yes  No

Full Name of Declarant:.....

Address of Declarant.....

.....

Declarant's Relationship to the individual.....Age.....

[Taxpayer Registration Number (TRN) grid with 10 columns and 1 row, containing dashes in the 4th and 7th columns]

.....  
ID Type attached

[Taxpayer Registration Number (TRN)]

.....  
ID No.

Contact# \_\_\_\_\_ Email Address: \_\_\_\_\_

AND I make this solemn declaration conscientiously believing the same to be true under

and by virtue of the Voluntary Declarations Act.

**TAKEN AND ACKNOWLEDGED**

By the said .....)  
 At )  
 In the parish of )  
 This day of 20 )  
 In the presence of )  
 )  
 .....)

Declarant's Signature

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

**(This Section to be used only when Declarant is unable to sign due to illness or illiteracy)**

**AND I/WE** make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.

If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**



**Statutory Declaration Form for Correction of Error**  
*(Declarant 2)*

This Declaration is made to correct an error on a **BIRTH Certificate**.

This certificate belongs to: \_\_\_\_\_  
(State full name here)

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Registration Birth Entry Number: \_\_\_\_\_

Place of REGISTRATION: \_\_\_\_\_  
Parish District

Where is the error located on the certificate (line #)?	What is the error?	What should the correction be?



and by virtue of the Voluntary Declarations Act.

**TAKEN AND ACKNOWLEDGED**

By the said .....)  
 At )  
 In the parish of )  
 This day of 20 )  
 In the presence of )  
 )  
 .....)

Declarant's Signature

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

**(This Section to be used only when Declarant is unable to sign due to illness or illiteracy)**

**AND I/WE** make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.

If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**





GOVERNMENT OF JAMAICA  
REGISTRAR GENERAL'S DEPARTMENT  
**THE REGISTRATION (BIRTHS AND DEATHS) ACT**  
Certified Copy of the Record of Infant Baptism (Form J)

Please PRINT All Information, Except Signatures, In BLOCK CAPITAL LETTERS.

This is a copy of the Register Book of Baptisms of the

\_\_\_\_\_ (Name of Church or Place of Worship)  
in the Parish of \_\_\_\_\_ for the Year \_\_\_\_\_

-----  
Space for Particulars from the Baptismal Register:  
-----

I, \_\_\_\_\_ Minister (or Person) in charge  
of \_\_\_\_\_ in the parish of  
\_\_\_\_\_ (Name of Church or Place of Worship)

\_\_\_\_\_, do hereby certify that the Baptismal  
Register of the said Church shows that on the \_\_\_\_\_ day of \_\_\_\_\_ in the Year \_\_\_\_\_,  
the Rev. \_\_\_\_\_ baptised by the Name(s) of  
\_\_\_\_\_, produced as the \_\_\_\_\_  
(son or daughter)

of \_\_\_\_\_ and \_\_\_\_\_  
(Mother's Names) (Father's Names)

and declared to have been born at \_\_\_\_\_ in the parish of \_\_\_\_\_

on the \_\_\_\_\_ day of \_\_\_\_\_ in the Year \_\_\_\_\_

The above entry is a True Copy of the record in the Baptismal Register of the Baptism of the said Child.

Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_ in the Year \_\_\_\_\_.

\_\_\_\_\_  
*Signature of Minister or Person in Charge*



## **CHECKLIST**

### **CORRECTION OF ERROR-(C/E) BIRTH**

#### **What are the main supporting documents?**

- Valid picture identification for **ALL** applicant and declarants. Either:
  - i. Passport;
  - ii. National ID;
  - iii. Driver's License; or
  - iv. Passport size photograph certified by a Justice of the Peace/Notary Public

#### **Documentary evidence (see attached list)**

#### **Who can be a declarant?**

- An individual (the child) whose record will be amended. This individual must be at least 18 years old;
- Mother or father/ legal guardian of the child whose record will be amended;
- Credible Witnesses (Preferable Relatives)

#### **Who can submit a Correction of Error application for a birth certificate?**

- An individual (the child) whose record will be amended. This individual must be at least 18 years old;
- Mother or father of the child whose record will be amended;
- In the absence of the mother and/or father, the legal guardian of the child;
- A person presenting a power of attorney which evidence his/her authority to act on behalf of the child or parent;
- A person presenting a written permission signed in the presence of a Justice of the Peace or a Notary Public, granted by the child, parent or legal guardian.

#### **Important Points to Remember**

- Signatures should be the same as on ID
- IDs for all the Declarants must be provided for processing an application.
- All errors must be crossed out and initialed by the same signing JP/Notary Public
- All information should be clearly written.
- All photocopied IDs and supporting documents, except those issued by the Registrar General's Department must be certified by the J.P./Notary Public.
- If a declarant with an overseas address signs before a J.P in Jamaica, the words: "Whilst on visit/trip to Jamaica" must be inserted beside the signature of the declarant.

**\*\*\*All corrections will be stated at the bottom of the newly printed certificates\*\*\***

#### **PRICES (SERVICE PERIOD):**

- **\$4,500 (4-6 weeks)**
  - **\$6,500 (7-10 working days)**
- ✓ Fees stated above are for one (1) copy of certificate. Additional copies cost \$500 each at the time of application
  - ✓ **DECLARANT TO DO INTERVIEW FIRST: processing of an application begins after a successful interview.**

## CHECKLIST CORRECTION OF ERROR-(C/E) BIRTH

For a correction to be made to a **Birth Certificate** the following documents showing the correct information must be submitted:

**NB: Two (2) Recorded Detailed Statutory Declarations may be required upon review for challenging cases.**

TYPE OF ERROR	SUPPORTING DOCUMENTS
There is a spelling error with the child's name	<input type="checkbox"/> a. School record for the child <input type="checkbox"/> b. Evidence of use of the name <input type="checkbox"/> c. Immunization card for the child <input type="checkbox"/> d. Copy of child's marriage certificate, if applicable <input type="checkbox"/> e. Copy of children's birth certificates, if applicable
Error in spelling of child's surname	<input type="checkbox"/> Father's birth certificate <input type="checkbox"/> School record for child <input type="checkbox"/> Baptismal Certificate
The date of birth or gender for a child	<input type="checkbox"/> a. School record for the child <input type="checkbox"/> b. Hospital/Midwife notification of birth <b>OR</b> <input type="checkbox"/> c. At least two detailed statutory declarations <input type="checkbox"/> d. List of children born to mother  <b>NB:</b> There is no guarantee that the age/gender will be corrected as each case depends on its own facts
Information entered on lines 9-12 concerning the father	<input type="checkbox"/> a. Father's birth certificate or <input type="checkbox"/> b. Court order (this is dependent on the circumstances of each case)
Information entered on lines 13-17 concerning the mother	<input type="checkbox"/> Mother's birth certificate <input type="checkbox"/> Proof of Address, if applicable <input type="checkbox"/> Children's birth certificates, if applicable List of children born to mother <input type="checkbox"/> Letter of employment, if applicable  <b>NB:</b> If mother uses a different name, various names or identity and either the mother or the child now wants to have the mother's name corrected, refer to challenge cases checklist.
Information entered on lines 19-21 concerning the informant	<input type="checkbox"/> Informant's birth certificate <input type="checkbox"/> Proof of qualification, if applicable <input type="checkbox"/> Proof of Address, if applicable
Incorrect order of name - The order of the names is different than the order being used.	<input type="checkbox"/> a. School Record for the child <input type="checkbox"/> b. Evidence of use of the name <input type="checkbox"/> c. Immunization card for the child <input type="checkbox"/> d. Copy of the child's marriage, if applicable <input type="checkbox"/> e. Copy of the children's birth certificates, if applicable  <b>NB:</b> IT MUST BE ESTABLISHED THAT AN ERROR OCCURRED BEFORE MAKING SUCH APPLICATION



## THE BIRTHS AND DEATHS REGISTRATION ACT

### CORRECTION OF ERROR (MARRIAGE) APPLICATION

I NEED  (# of copies) of the MARRIAGE certificate:

Bride's Full Name (including Maiden Name):	Groom's Full Name:
Place of Marriage:	Parish of Marriage:
Marriage Officer's Name:	Date of Marriage (dd/ mm/ yyyy):

### APPLICANT'S INFORMATION

Full Name:	TRN:
Street Address/ Town/City, Zip Code, Country:	
Relationship to individual:	Email Address:
<b>Reason for applying (please tick):</b> _____ Driver's licence _____ Passport _____ Visa _____ Other	<b>Telephone number:</b> _____(cell) _____(home) _____(work)
Signature of Applicant:	Date of Application:



## Statutory Declaration Form for Correction of Error (Declarant 1)

This Declaration is made to correct an error on a **MARRIAGE Certificate**.

This certificate belongs to: \_\_\_\_\_  
(State Bride's Full name and Groom's Full Name)

Date of Marriage: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Place of Marriage: \_\_\_\_\_  
Parish District

Marriage Officer's Name: \_\_\_\_\_

Where is the error located on the certificate (line #)?	What is the error?	What should the correction be?

State the reasons for the error:

[Empty rectangular box for stating reasons for the error]

That I wish to amend any other errors cited by the Registrar General's Department (RGD) after written instructions to the RGD. Yes  No

Full Name of Declarant:.....

Address of Declarant.....

.....

Declarant's Relationship to Bride/Groom.....Age.....

[Taxpayer Registration Number (TRN) grid with 10 columns and 1 row, containing dashes in the 4th and 7th columns]

.....  
ID Type attached

[Taxpayer Registration Number (TRN)]

.....  
ID No.

Contact # \_\_\_\_\_ Email Address: \_\_\_\_\_

AND I make this solemn declaration conscientiously believing the same to be true under

and by virtue of the Voluntary Declarations Act.

**TAKEN AND ACKNOWLEDGED**

By the said .....)  
 At )  
 In the parish of )  
 This day of 20 )  
 In the presence of )  
 )  
 .....)

Declarant's Signature

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

**(This Section to be used only when Declarant is unable to sign due to illness or illiteracy)**

**AND I/WE** make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.

If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**



## Statutory Declaration Form for Correction of Error (Declarant 2)

This Declaration is made to correct an error on a **MARRIAGE Certificate**.

This certificate belongs to: \_\_\_\_\_  
(State Bride's Full name and Groom's Full Name)

Date of Marriage: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Place of Marriage: \_\_\_\_\_  
Parish District

Marriage Officer's Name: \_\_\_\_\_

Where is the error located on the certificate (line #)?	What is the error?	What should the correction be?



and by virtue of the Voluntary Declarations Act.

**TAKEN AND ACKNOWLEDGED**

By the said .....)  
At ) Declarant's Signature  
In the parish of )  
This day of 20 )  
In the presence of )  
.....)

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

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**AND I/WE** make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.

If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**

## CHECKLIST CORRECTION OF ERROR (CE) –MARRIAGE

### What are the main supporting documents?

- Valid picture identification for ALL applicant and declarants. Either:
  - i. Passport;
  - ii. National ID;
  - iii. Driver's License; or
  - iv. Passport size photograph certified by a Justice of the Peace/Notary Public

### Documentary evidence (see attached list)

### Who can be a declarant?

- The Bride and the Groom whose record will be amended.
- Credible Witnesses(eg. Persons who attended the wedding)

### Who can submit a Correction of Error application for a Marriage Certificate?

- The Bride or Groom whose record will be amended.
- A person presenting a power of attorney
- A person presenting a written permission signed in the presence of a Justice of the Peace or a Notary Public, granted by Bride/Groom
- A person by an order of the Court;

### Important Points to Remember

- Signatures should be the same as on ID
- IDs for all the Declarants must be provided for processing an application.
- All errors must be crossed out and initialed by the same signing JP/Notary Public
- All information should be clearly written.
- All photocopied IDs and supporting documents, except those issued by the Registrar General's Department must be certified by the J.P./Notary Public.
- If a declarant with an overseas address signs before a J.P in Jamaica, the words: "Whilst on visit/trip to Jamaica" must be inserted beside the signature of the declarant.

**\*\*\*All corrections will be stated at the bottom of the newly printed certificates\*\*\***

### PRICES (SERVICE PERIOD):

- \$4,500 (4-6 weeks)
  - \$6,500 (7-10 working days)
- ✓ Fees stated above are for one (1) copy of certificate. Additional copies cost \$500 each at the time of application
- ✓ **DECLARANT TO DO INTERVIEW FIRST:** processing of an application begins after a successful interview.



## CHECKLIST CORRECTION OF ERROR (CE) –MARRIAGE

For a correction to be made to a **Marriage Certificate** the following documents showing the correct information must be submitted:

**NB: Two (2) Recorded Detailed Statutory Declarations may be required upon review for challenging cases.**

TYPE OF ERROR	SUPPORTING DOCUMENTS
Date of Marriage	<input type="checkbox"/> a. Bridal copy (where applicable) <input type="checkbox"/> b. Invitation cards <input type="checkbox"/> c. Programme <input type="checkbox"/> d. Letter from the church where the ceremony was solemnized
Bride's Name/Age or Groom's Name/Age	<input type="checkbox"/> a. Bride's Birth Certificate <input type="checkbox"/> b. Groom's Birth Certificate
Bride's Residence or Groom's Residence	<input type="checkbox"/> a. Valid Identification, such as, Driver's License <input type="checkbox"/> b. Utility Bill
Bride's father's name or Groom's father's name	<input type="checkbox"/> a. Bride's Birth Certificate <input type="checkbox"/> b. Bride's Father's Birth Certificate <input type="checkbox"/> c. Groom's Birth Certificate <input type="checkbox"/> d. Groom's Father's Birth Certificate <input type="checkbox"/> e. Court order (where applicable)
Bride's occupation or Groom occupation	<input type="checkbox"/> a. Valid Identification, such as, Passport reflecting occupation at the time of the marriage or work identification card <input type="checkbox"/> b. Job Letter
Bride's status or Groom's status	<b>NB:</b> All applications for this type of error must be reviewed by Customer Care Manager/Regional Managers/AVID Manager/Legal Unit.



THE BIRTHS AND DEATHS REGISTRATION ACT

CORRECTION OF ERROR (DEATH) APPLICATION		
I NEED <input type="checkbox"/> (# of copies) of the death certificate for the following individual:		
First Name of Deceased	Middle Name(s)	Surname
Date of Death (dd/ mm/ yyyy)	Sex of Deceased:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Place of Death (Hospital Name or Home Address)	(Parish of Death)	(District of Death)
Death entry number	Date of Registration (dd/ mm/ yyyy)	
How did the person die? (Tick the box that applies):		
<input type="checkbox"/> Violently	<input type="checkbox"/> Suddenly	<input type="checkbox"/> Accidentally <input type="checkbox"/> Natural Causes

APPLICANT'S INFORMATION	
Full Name:	TRN:
Street Address/ Town/City, Zip Code, Country:	
Relationship to individual:	Email Address:
Reason for applying (please tick): <input type="checkbox"/> Driver's licence <input type="checkbox"/> Passport <input type="checkbox"/> Visa <input type="checkbox"/> Other	Telephone number: _____(cell) _____(home) _____(work)
Signature of Applicant:	Date of Application:



## Statutory Declaration Form for Correction of Error (Declarant 1)

This Declaration is made to correct an error on a **DEATH Certificate**.

This certificate belongs to: \_\_\_\_\_  
(State full name here)

Date of Death: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day                      Month                      Year

Registration DEATH Entry Number: \_\_\_\_\_

Place of REGISTRATION: \_\_\_\_\_  
Parish                                      District

Where is the error located on the certificate (line #)?	What is the error?	What should the correction be?



and by virtue of the Voluntary Declarations Act.

**TAKEN AND ACKNOWLEDGED**

By the said .....)  
 At )  
 In the parish of )  
 This day of 20 )  
 In the presence of )  
 )  
 .....)

Declarant's Signature

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

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**AND I/WE** make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.

If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**



## Statutory Declaration Form for Correction of Error (Declarant 2)

This Declaration is made to correct an error on a **DEATH Certificate**.

This certificate belongs to: \_\_\_\_\_  
(State full name here)

Date of Death: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Registration Birth Entry Number: \_\_\_\_\_

Place of REGISTRATION: \_\_\_\_\_  
Parish District

Where is the error located on the certificate (line #)?	What is the error?	What should the correction be?

State the reasons for the error:

[Empty rectangular box for stating reasons for the error]

That I wish to amend any other errors cited by the Registrar General's Department(RGD) after discussion with RGD. Yes  No

Full Name of Declarant:.....

Address of Declarant.....

.....

Declarant's Relationship to the individual..... Age.....

[Taxpayer Registration Number (TRN) grid with 10 columns and 2 rows, containing dashes in the 4th and 7th columns]

.....  
ID Type attached

[Taxpayer Registration Number (TRN)]

.....  
ID No.

Contact# \_\_\_\_\_ Email Address: \_\_\_\_\_

AND I make this solemn declaration conscientiously believing the same to be true under

and by virtue of the Voluntary Declarations Act.

**TAKEN AND ACKNOWLEDGED**

By the said .....)  
 At )  
 In the parish of )  
 This day of 20 )  
 In the presence of )  
 )  
 .....)

Declarant's Signature

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

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If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**

## CHECKLIST CORRECTION OF ERROR (CE) - DEATH

**\*\*\*NOT TO BE USED IN SUDDEN AND VIOLENT DEATH CASES\*\*\***

### **What are the main supporting documents?**

- Valid picture identification for **ALL** applicant and declarants. Either:
  - i. Passport;
  - ii. National ID;
  - iii. Driver's License; or
  - iv. Passport size photograph certified by a Justice of the Peace/Notary Public

### **Documentary evidence (see attached list)**

#### **Who can be a declarant?**

- Widow, Widower or children
- Relatives of the deceased
- Credible Witnesses e.g., Funeral Directors and Pastor who interred the body

### **Who can submit a Correction of Error application for a Death Certificate?**

- Widow, Widower or children
- Parents or legal guardian
- A person presenting a power of attorney which evidence his/her authority to act
- A person presenting a written permission signed in the presence of a Justice of the Peace or a Notary Public, granted by the widow, widower, children, parents/legal guardian
- A person by an order of the Court;

### **Important Points to Remember**

- Signatures should be the same as on ID
- IDs for all the Declarants must be provided for processing an application.
- All errors must be crossed out and initialed by the same signing JP/Notary Public
- All information should be clearly written.
- All photocopied IDs and supporting documents, except those issued by the Registrar General's Department must be certified by the J.P./Notary Public.
- If a declarant with an overseas address signs before a J.P in Jamaica, the words: "Whilst on visit/trip to Jamaica" must be inserted beside the signature of the declarant.

**\*\*\*All corrections will be stated at the bottom of the newly printed certificates\*\*\***

### **PRICES (SERVICE PERIOD):**

- **\$4,500 (4-6 weeks)**
- **\$6,500 (7-10 working days)**
- ✓ Fees stated above are for one (1) copy of certificate. Additional copies cost \$500 each at the time of application
- ✓ **DECLARANT TO DO INTERVIEW FIRST: processing of an application begins after a successful interview.**

## CHECKLIST CORRECTION OF ERROR (CE) - DEATH

For a correction to be made to a **Death Certificate** the following documents showing the correct information must be submitted:

**NB: Two (2) Recorded Detailed Statutory Declarations may be required upon review for challenging cases.**

TYPE OF ERROR	SUPPORTING DOCUMENTS
a. Name or Age of the deceased	<input type="checkbox"/> a. Deceased Birth Certificate
b. Gender of the deceased	<input type="checkbox"/> a. Deceased Birth Certificate <input type="checkbox"/> b. Marriage Certificate <input type="checkbox"/> c. Children's birth Certificates
c. Deceased Occupation	<input type="checkbox"/> a. Identification, such as, Passport reflecting occupation at the time of the death or work identification card <input type="checkbox"/> b. Job Letter
f. Date of Death	<input type="checkbox"/> a. Medical Certificate of the Cause of Death (M.C.C.D.) or Post Mortem Examination Report  (Date of death to be treated under the clerical error process upon review of supporting documents)
g. Condition (Deceased Status)	<input type="checkbox"/> a. Death Certificate for the previous spouse (where applicable) <input type="checkbox"/> b. Decree Absolute (where applicable) Where the decree absolute is unavailable, the two detailed statutory declarations, including a letter from the Supreme Court indicating same. These declarations should be recorded at the Island Record Office at the prescribed fees. <input type="checkbox"/> c. Marriage Certificate <input type="checkbox"/> d. No Impediment;
h. Informant's information (such as the address and qualification)	<input type="checkbox"/> a. Identification <input type="checkbox"/> b. Utility Bill or letter from Home Owner/Main occupier of the House <input type="checkbox"/> c. Informant's Birth Certificate