## End a civil partnership application form

## Before submitting your application

	I/We understand that this application is to end our civil partnership.			
	I/We understand that our civil partnership will not end until 90 days after submitting this application form to RBDMwe can withdraw our application at any time during these 90 days.			
	I/We have completed the application form.			
	I/We have included copies of the required proof of ID with our application.			
	All copies of our proof of ID have been certified as being 'a true and correct copy' by a qualified witness			
	Get your signatures witnessed by a Justice of the Peace, Commissioner for Declarations, Notary Public, Barrister, or Solicitor in the statutory declaration section on pages 3 and 5 of the application form. Note that, in certain circumstances allowed under the Oaths Act 1867, you may direct a another person (substitute signatory) to sign the declaration on your behalf in the presence of an authorised witness. Explanatory guides about completing the statutory declaration sections are available at www.publications.qld.gov.au/dataset/statutory-declaration			
If only 1 partner is applying to end the civil partnership:				
	My civil partner has been served a copy of the application to end our civil partnership.			
	I have completed and attached the End a civil partnership Statutory Declaration (single applicant) with my application. Explanatory guides about completing the statutory declaration sections are available at www.publications.gld.gov.au/dataset/statutory-declaration			

### Submitting your application

Your application will take longer if your documents and payment are not correct. Submit your application form either:

- by post, with payment and certified copies of proof of ID to Registry of Births, Deaths and Marriages,
   PO Box 15188, CITY EAST QLD 4002
- in person take your completed application form, **original** proof of ID and payment to the Brisbane registry customer service centre at Level 32, 180 Ann Street, Brisbane; your nearest Queensland Magistrates Court (except the Brisbane Magistrates Court); or Queensland Government Agent Program (QGAP) office.

Payment options Your	credit card will be cha	ed according to current fees		
a) Who applied your name of	or organisation			
b) Partner 2's name in full				
c) I have enclosed a bank Births, Deaths and Marria	•		try of	
or debit my credit card	\$	MasterCard	d Visa	
Card number				
Expiry date				
Name on card			Signature of cardholder	



#### **Proof of ID (identification)**

Copies of Proof of ID documents sent to us by post with your application must be certified as a true and correct copy by a qualified witness—do not send original proof of ID by post. If you apply in person at the Brisbane registry customer service centre or nearest Queensland Magistrates Court (except the Brisbane Magistrates Court) or Queensland Government Agent Program (QGAP), customer service officers are able to sight your original proof of ID.

When applying by post the following persons are qualified witnesses and are able to certify photocopies of documents:

In Australia	Outside Australia
Justice of the Peace	Notary Public
Commissioner for Declarations	Australian Embassy officer
Barrister or Solicitor	Australian Consulate officer
Notary Public	

Types of ID (actoroxics)

#### You must provide 3 forms of current ID:

- 1 from each category below; OR
- 2 from Community ID and 1 from the Home address evidence categories below.

If you currently live overseas, you may use the local equivalent for the ID items listed.

For documents not in English, you must also provide a translation from a translator accredited by the National Accreditation Authority for Translators and Interpreters (NAATI).

This list is not exhaustive. Please contact the registry to discuss other types of ID that may be accepted.

Personal ID	Community ID	Home address evidence		
Australian photo driver licence Australian passport Overseas passport Adult Proof of Age card (formerly 18+ card)	Medicare card Concession or Healthcare card Student ID School or other educational report, less than twelve months old Salary advice or payslip Private Health Provider ID card Defence Force or Police Service photo ID card Australian Firearms licence Document of identity issued by the Passport Office Naturalisation, citizenship or immigration certificate Full birth certificate Security guard/crowd control licence Government employee photo ID card Blue card	Provide only the page containing your name and current home address details.  Recent utility account (gas, electricity, home phone, etc) Rent/lease agreement Rates notice Registration or driver licence renewal notice Recent official correspondence from Government service providers (not from this agency) Electoral enrolment document Insurance policy notice		

# Form 18 (Version 4) End a civil partnership application form

Office use only
Date received and registration no.:

Effective as of 01/07/2022 Civil Partnerships Act 2011 (Section 15)

If submitting this form as an individual applicant, please also complete the End a civil partnership Statutory Declaration (single applicant).

1. Who is applying These of	details must be as shown on y	our proof of ID and supporting doc	uments
	Partner 1	Partner 2	
First name			
Middle name/s if any			
Family name			
Home address			
Postal address if different to home address			
Email			
Contact number			
By providing an email address that it is my responsibility to e it is my responsibility to ensur	ensure that I have nomina	ited a secure email address t	
2. Birth details These details	must be as shown on your bi	rth certificate	
	Partner 1	Partner 2	
Place of birth Town/city, state and country	Partner 1	Partner 2	
	Partner 1	Partner 2	
Town/city, state and country	Partner 1	Partner 2	
Town/city, state and country  Date of birth	Partner 1	Partner 2	
Town/city, state and country  Date of birth  Sex	Partner 1	Partner 2	
Town/city, state and country  Date of birth  Sex  Mother's first name	Partner 1	Partner 2	
Town/city, state and country  Date of birth  Sex  Mother's first name  Mother's middle name/s if any	Partner 1	Partner 2	
Town/city, state and country  Date of birth  Sex  Mother's first name  Mother's middle name/s if any  Mother's family name  Father's (or registered	Partner 1	Partner 2	
Town/city, state and country  Date of birth  Sex  Mother's first name  Mother's middle name/s if any  Mother's family name  Father's (or registered parent's) first name  Father's (or registered	Partner 1	Partner 2	
Town/city, state and country  Date of birth  Sex  Mother's first name  Mother's middle name/s if any  Mother's family name  Father's (or registered parent's) first name  Father's (or registered parent's) middle name/s if any  Father's (or registered		Partner 2	
Town/city, state and country  Date of birth  Sex  Mother's first name  Mother's middle name/s if any  Mother's family name  Father's (or registered parent's) first name  Father's (or registered parent's) middle name/s if any  Father's (or registered parent's) middle name/s if any		Date of registration if known	

Continue to next page

#### **Privacy statement**

The Department of Justice and Attorney-General is collecting your personal information for the purpose of processing your statutory declaration to end a civil partnership under the *Births, Deaths and Marriages Registration Act 2003*, the *Oaths Act 1867* and the *Civil Partnerships Act 2011*. Unless required or authorised by law, your personal information will not be provided to any third party without your consent. To obtain details about the access policy and rights of access to this information contact the registry within Australia **13QGOV (13 74 68)**, international callers **+61 7 3022 6100** (+10 hours UTC). For general information about the registry visit **www.gld.gov.au/rbdm**.

All items marked with an asterisk(\*) are for statistical, administrative and community planning purposes and will not appear in the Registers.

Continue to next page

\*\* IMPORTANT NOTE \*\*
THIS SPACE IS INTENTIONALLY LEFT BLANK.

Partner 1's Statutory decl	aration			
I your name in full				
Do solemnly and sincerely dec	are that:			
1. I live at your home address				
2. I wish to end my civil partner	ship with name of partner 2			
	•			
and I make this solemn declarathe Oaths Act 1867.	tion conscientiously believing the same to be true	by virtue of t	he provisions of	
declaration are based on inforr stated the source of that inforn	is statutory declaration are true and correct. When ation and belief, the contents are true to the best nation and grounds for the belief.  I offence to provide a false matter in a declaration	of my knowle	dge and I have	
perjury under section 123 of th		, ioi example,	the offerice of	
I state that: *cross-out whichever state				
A. This declaration was made in the t				
B. This declaration was electronically	signed.*[ii]			
C. This declaration was made, signed	and witnessed under part 6A of the Oaths Act 1867 (audio	visual links).*[iii		
Declared at place		on	DD MM YYYY	
Signature of partner 1		'	1	
If partner 1 has directed a subs	tituted signatory to sign for them cross-out or leave	blank if not appli	cable	
Full name of substituted signatory		on	DD MM YYYY	
Signature of substituted signatory		'		
In the presence of:				
Full name of witness				
	ralian legal practitioner, lawyer, Justice of the Peace, Comr missioner for declarations approved by the Chief Executive			
	II.	ISERT JP SEA	L HERE	
Signature				
Witness's place of employment cross-out or leave blank if not applica		on	DD MM YYYY	
For example, the name of the law pra	actice for the Australian legal practitioner, the name of the g	overnment depa	rtment of the	
government legal officer, the name o	f the law practice for a justice of the peace who witnesses d	ocuments for a l	aw practice, etc.	
For special witness to complete	Tick as applicable			
		4 1067\		
	der the Oaths Act 1867. (see section 12 of the Oaths Act in the form of an electronic decument livil	1 1807)		
This document was made in the form of an electronic document.[iv]				
☐ I electronically signed this document.[v]				
	This statutory declaration was made, signed and witnessed under part 6A of the Oaths Act 1867 I understand the requirements for witnessing a document by audio visual link and have complied with those requirements.[vi]			

\*\* IMPORTANT NOTE \*\*

PLEASE COMPLETE THE NEXT PAGE TITLED
HOW THIS DOCUMENT WAS MADE.
PLEASE ATTACH THIS PAGE TO YOUR STATUTORY DECLARATION.

#### **HOW THIS DOCUMENT WAS MADE**

# Please attach this page to your statutory declaration NOTE: FAILURE TO COMPLETE THIS TABLE DOES NOT INVALIDATE THE DOCUMENT

he signatory (partner 1 declarant) or substitute signatory	SIGNATORY / SUBSTITUTE SIGNATORY to complete			
nust complete this section	Who signed this declaration?			
	the signatory (partner 1/declarant)			
	a substitute signatory			
	How did the signatory/substitute signatory sign?			
	on paper			
	electronically			
	How was this declaration witnessed?			
	in person			
	over audio visual link			
he witness must complete this ection	WITNESS to complete			
	How did you (the witness) sign this document?			
	on paper			
	electronically			
	What document did you (the witness) sign?			
	The same physical (paper) document that was signed in the presence of the signatory /substitute signatory			
	A copy of the document that was signed by the signatory/substitute signatory (e.g a scanned copy of a paper signed document, a photocopy or printout)			
	A counterpart of the document (a copy of the document without the signature of the signatory/substitute signatory)			
	What form of document did you (the witness) sign?			
	paper			
	electronic (tick this if you electronically signed the document or if you physically signed a copy of the document signed by the signatory/substitute signatory and then sent a scanned copy of that document to the signatory or other person)			
	How was the substitute signatory directed to sign (if applicable)?			
	in person by the signatory			
	over audio visual link by the signatory			

#### **Footnotes**

- [i] Include this statement if you electronically signed the document or if you physically signed the document over audio visual link and then sent a scanned copy of that document to the witness.
- [ii] Include this statement if you or your substitute signatory electronically sign the document using an accepted method under the *Oaths Act 1867*. Do not include this statement if you signed the document on paper.
- [iii] Include this statement if the document was made over audio visual link.
- [iv] Tick this box if you electronically signed the document or if you physically signed the document and sent a scanned copy of that document to the declarant.
- [v] This this box if you electronically sign the document using an accepted method under the *Oaths Act 1867*. Do not include this statement if you signed the document on paper.
- [vi] Tick this box if the statutory declaration was made over audio visual link.

#### Continue to next page

Partner 2's Statutory decl	aration		
l your name in full			
Do solemnly and sincerely dec	lare that:		
1. I live at your home address			
2. I wish to end my civil partne	rship with name of partner 1		
and I make this solemn declara the Oaths Act 1867.	tion conscientiously believing the same to be	true by virtue of the	he provisions of
declaration are based on inforr stated the source of that inforn	his statutory declaration are true and correct. In nation and belief, the contents are true to the nation and grounds for the belief.	best of my knowle	dge and I have
perjury under section 123 of th	•	ition, for example,	the offence of
I state that: *cross-out whichever sta			
A. This declaration was made in the	form of an electronic document.*[i]		
B. This declaration was electronically	signed.*[ii]		
C. This declaration was made, signed	d and witnessed under part 6A of the Oaths Act 1867 (a	audio visual links).*[iii]	
Declared at place		on	DD MM YYYY
Signature of partner 2			
If partner 1 has directed a subs	stituted signatory to sign for them cross-out or le	eave blank if not applic	cable
Full name of substituted signatory		on	DD MM YYYY
Signature of substituted signatory		'	
In the presence of:			
Full name of witness			
	tralian legal practitioner, lawyer, Justice of the Peace, on the Peace, on the Chief Exec		
		INSERT JP SEA	L HERE
Signature			
Witness's place of employment cross-out or leave blank if not applica		on	DD MM YYYY
For example, the name of the law pra	actice for the Australian legal practitioner, the name of	the government depar	tment of the
government legal officer, the name of	f the law practice for a justice of the peace who witness	ses documents for a la	aw practice, etc.
For angular witness to complet	• Tiek ee ennlieeble		
For special witness to complet		4 ( (007)	
I am a <b>special witness</b> under the <i>Oaths Act 1867</i> . (see section 12 of the Oaths Act 1867)			
This document was made in the form of an electronic document.[iv]			
I electronically signed this document.[v]			
This statutory declaration was made, signed and witnessed under part 6A of the <i>Oaths Act 1867</i> I understand the requirements for witnessing a document by audio visual link and have complied with those requirements.[vi]			

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PLEASE COMPLETE THE NEXT PAGE TITLED
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PLEASE ATTACH THIS PAGE TO YOUR STATUTORY DECLARATION.

#### **HOW THIS DOCUMENT WAS MADE**

# Please attach this page to your statutory declaration NOTE: FAILURE TO COMPLETE THIS TABLE DOES NOT INVALIDATE THE DOCUMENT

The signatory (partner 2 SIGNATORY / SUBSTITUTE SIGNATORY to complete /declarant) or substitute signatory must complete this section Who signed this declaration? the signatory (partner 2/declarant) a substitute signatory How did the signatory/substitute signatory sign? on paper electronically How was this declaration witnessed? in person over audio visual link The witness must complete this WITNESS to complete section How did you (the witness) sign this document? on paper electronically What document did you (the witness) sign? The same physical (paper) document that was signed in the presence of the signatory /substitute signatory A copy of the document that was signed by the signatory/substitute signatory (e.g a scanned copy of a paper signed document, a photocopy or printout) A counterpart of the document (a copy of the document without the signature of the signatory/substitute signatory) What form of document did you (the witness) sign? paper electronic (tick this if you electronically signed the document or if you physically signed a copy of the document signed by the signatory/substitute signatory and then sent a scanned copy of that document to the signatory or other person) How was the substitute signatory directed to sign (if applicable)? in person by the signatory over audio visual link by the signatory

#### **Footnotes**

- [i] Include this statement if you electronically signed the document or if you physically signed the document over audio visual link and then sent a scanned copy of that document to the witness.
- [ii] Include this statement if you or your substitute signatory electronically sign the document using an accepted method under the *Oaths Act 1867*. Do not include this statement if you signed the document on paper.
- [iii] Include this statement if the document was made over audio visual link.
- [iv] Tick this box if you electronically signed the document or if you physically signed the document and sent a scanned copy of that document to the declarant.
- [v] This this box if you electronically sign the document using an accepted method under the *Oaths Act 1867*. Do not include this statement if you signed the document on paper.
- [vi] Tick this box if the statutory declaration was made over audio visual link.