

STATEMENT OF INFORMANT'S QUALIFICATION TO REGISTER

I (full name)

of (address)

wish to register the death of

Please circle the number of the appropriate statement in both sections below:

I hereby confirm that

1. There are no known relatives of the deceased
2. I have consulted with relatives of the deceased who do not live locally and they will not register the death themselves either in this registration district or by declaration in the district in which they reside.
3. I have consulted with the relatives of the deceased who live locally who have refused to register this death.

I also confirm that I am qualified to act as the informant as

1. I was present at the death
2. I, personally, am instructing the funeral directors
3. I am the Governor, Keeper, Master, Matron, Superintendent or other Chief Resident Officer of the home.

I understand that any person who knowingly and wilfully gives false information to a Registrar for insertion in a birth, death or marriage register or makes a false declaration for the purpose of the registration of a birth or death or to procure a marriage, is liable to prosecution for PERJURY.

Milton Keynes Council Data Protection Privacy Statement

We collect and use information about you so that we can provide you with services under registration legislation. Full details about how we use this data and the rights you have around this can be found at www.milton-keynes.gov.uk/privacy. If you have any data protection queries, please contact the Data Protection Officer at data.protection@milton-keynes.gov.uk

Signed:

Date:

Register Office use only:

Register / Entry No

Destroy after 6 months.

Destruction date