

Form B- Name Change for Couple

INSTRUCTIONS FOR CHANGE OF NAME

Please read the Instructions for Change of Name carefully or have someone explain them to you. You may use the forms attached or you may re-type the forms using the identical format provided by the Office of the Lieutenant Governor. **All forms must be typed.** Forms may be copied.

THE FOLLOWING FORMS ARE INCLUDED IN THIS PACKET AND MUST BE SUBMITTED UPON COMPLETION:

PETITION

FACT SHEET

NOTICE OF CHANGE OF NAME

ORDER

NOTICE TO CONVICTED SEXUAL OFFENDERS

PURSUANT TO ACT 47 OF 2007, IF YOU ARE A CONVICTED SEXUAL OFFENDER, WITH AN OBLIGATION TO REGISTER UNDER HRS CHAPTER 846E, YOU ARE PROHIBITED FROM CHANGING YOUR LEGAL NAME IN THE OFFICE OF THE LIEUTENANT GOVERNOR WITHOUT PRIOR COURT APPROVAL.

TO ENSURE COMPLIANCE WITH THE LAW, THE OFFICE OF THE LIEUTENANT GOVERNOR WILL CONDUCT A CRIMINAL BACKGROUND CHECK ON ALL NAME CHANGE APPLICANTS.

\$50 NON-REFUNDABLE FILING FEE

All Petitions must be accompanied by a Money Order or Cashier's Check made payable to the Office of the Lieutenant Governor in the amount of \$50.00; No personal checks will be accepted. Cash payment will only be accepted when the Petitioner hand carries documents into the Office of the Lieutenant Governor.

INSTRUCTIONS FOR COMPLETING THE PETITION – (PAGES 1 TO 5)

- (1) This is the official heading. Type in both spouses' **full, legal names** - which would be the names exactly as they appear on your respective birth certificates (except where there has been a name change via marriage, divorce, court order, or other legal means). **TYPE ONLY YOUR CURRENT LEGAL NAME, NOT THE NAME TO WHICH YOU WOULD LIKE TO CHANGE.**
- (2) Type in the full, legal names just as they appear in the heading in the spaces provided.
- (3) Type in spouse 1's name and all other information requested. Type the name on your birth certificate or certificate of naturalization, and other names spouse 1 is using or has used.
- (4) Type in spouse 2's name and all other information requested. Type the name on your birth certificate or certificate of naturalization, and other names spouse 2 is using or has used.
- (5) Type in couple's current State of residence. For those locations where there are no street addresses, P.O. Boxes are allowed but please describe the general location of residence.
- (6) Type in the date and place of marriage/civil union.
- (7) Check the appropriate response. If either spouse has been convicted of a felony or a sexual offense, please state the type and date of conviction, and final disposition of the case. Fully explain the charges, the sentence, the terms and conditions of parole or probation, the date of final discharge of the sentence, whether there was a deferred acceptance of a guilty or no-contest plea, if there was a pardon, and by whom the pardon was granted.
- (8) Type in the names of each spouse exactly as you want it spelled once it is legally changed.
- (9) Type in the names of each spouse exactly as they appear in the heading and then as you want them to appear after they are changed.
- (10) Make sure you date the Petition here either at the time you have it notarized or before you have it notarized. The Petition will not be processed if you date it after it is notarized. In the space provided, indicate the city and State in which the petition was notarized.
- (11) Sign the petition in black ink, exactly as it is typed in the heading. **DO NOT USE INITIALS OR NICKNAMES IN THE SIGNATURE.**
- (12) Type the full, legal name of both Petitioners.
- (13) Sign the petition in black ink in front of the notary. **DO NOT USE INITIALS OR NICKNAMES. SIGN YOUR FULL, LEGAL NAME.** The notary will complete his/her portion.

INSTRUCTIONS FOR COMPLETING THE NOTICE OF CHANGE OF NAME – (PAGE 8)

- Where indicated, type in the current legal full name, address, and telephone number in the space provided for one of the spouses.
- Type in the current full, legal name of each spouse below the heading “In the Matter of the Petitioner.”
- Type in the current legal full name of each spouse in the first two spaces on the document, and the newly proposed names in the following two spaces exactly as you want them to appear after they are legally changed.

Submit one (1) original of NOTICE OF CHANGE OF NAME. Copies are not required.

Once your Petition has been approved, the Lieutenant Governor will sign the NOTICE, which will then be returned to you. **You may then mail or take the NOTICE to the newspaper agency for publication.**

The NOTICE OF CHANGE OF NAME must be published in the newspaper and an AFFIDAVIT executed within **SIXTY (60) calendar days** after it is signed by the Lieutenant Governor.

NOTE: The newspaper provides the Affidavit. You do not have to provide that form.

FAILURE TO PUBLISH WITHIN THE TIME REQUIRED AUTOMATICALLY VOIDS THE PETITION FOR CHANGE OF NAME.

The couple must make sure the newspaper will mail the AFFIDAVIT of publication to our office within sixty (60) days of publishing and a copy of the AFFIDAVIT to you for your files. If we do not receive an AFFIDAVIT from the newspaper, at the end of sixty (60) days, we will assume that you did not have the change of name published and your Petition will be voided. If mailed, the date of the postmark shall be determined as the date of receipt.

INSTRUCTIONS FOR COMPLETING THE ORDER - (PAGES 9 TO 10)

- Where indicated, type in the current legal full name, address, and telephone number in the space provided for one of the spouses who will be deemed the designated person of contact.
- Below the phrase, "In the Matter of the Petition," type in the full, legal name of each spouse in the heading exactly as you did on the Petition;
- In the space provided, type each spouse's current legal full name and each spouse's new name exactly as you want them to appear after they are legally changed.
- **DO NOT FILL IN THE DATE.** We will fill in the date of publication, effective date and date of the Lieutenant Governor's signature, upon approval of the order.

Once our office receives the AFFIDAVIT from the newspaper showing publication of your name change, the Lieutenant Governor will sign the administrative ORDER and it will be sent to you. You must file a copy of the ORDER with the Bureau of Conveyances within sixty (60) days after the signing of the ORDER, (See H.R.S. 574b).

INSTRUCTIONS FOR RETURNING DOCUMENTS

Mail or deliver the documents to:

Office of the Lieutenant Governor
State Capitol
415 South Beretania Street, 5th Floor
Honolulu, Hawaii 96813

For additional information, call (808) 586-0255.

The following must be submitted to the Lieutenant Governor's Office.

_____ BIRTH CERTIFICATE- a *certified* copy of your original birth certificate from the state you were born. Certification must be not older than 90 days prior to submission of your name change forms. Foreign birth certificates must be translated into English; original Certificate of Naturalization or alien registration card and Passport

_____ PETITION - notarized within 30 days prior to submission of name change forms (must be notarized by a State of Hawaii notary public)

_____ FACT SHEET

_____ NOTICE OF CHANGE OF NAME

_____ ORDER- original plus five (5) copies

_____ NON-REFUNDABLE FILING FEE- Money order or Cashier's Check made payable to the Office of the Lieutenant Governor in the amount of \$50.00; No personal check will be accepted. Cash will only be accepted when the petitioner hand carries documents into the Office of the Lieutenant Governor.

_____ Marriage Certificate, Divorce Decree, Death Certificate, Paternity Documents, Adoption Decree, Guardianship documents, prior name change decree, if applicable (copies acceptable)

_____ Petitions with liquid paper corrections must be initialed by the notary

_____ Please enclose 2 self-addressed stamped envelopes:
1 ea. #10 (regular) envelope with \$.49 stamps
1 ea. large flat manila envelope with \$2.00 stamps

A PETITION CONTAINING TYPOGRAPHICAL ERRORS, MISSING INFORMATION OR OTHERWISE NOT IN CONFORMANCE WITH THESE INSTRUCTIONS WILL NOT BE ACCEPTED FOR PROCESSING.

NOTICE REGARDING LEGAL ADVICE

The Office of the Lieutenant Governor cannot render legal advice regarding name changes. We can only answer questions related to the procedures involved in processing name changes. **IF YOU HAVE LEGAL QUESTIONS, YOU SHOULD CONTACT AN ATTORNEY.**

OFFICE OF THE LIEUTENANT GOVERNOR

OF THE STATE OF HAWAII

In the Matter of the Petition)
)
 of)
)
 (1) _____)
 Spouse 1)
)
 and)
)
 _____)
 Spouse 2)
)
 For Change of Names)
)

PETITION

TO THE HONORABLE SHAN S. TSUTSUI, LIEUTENANT GOVERNOR OF THE STATE OF HAWAII:

(2) COMES NOW _____ and
 _____ your Petitioners herein, and respectfully
 pray that an order be entered herein changing their names and in support thereof represents as
 follows:

I. (Spouse 1)

(3) That your Spouse 1 is _____
 date of birth is _____
 place of birth is _____
 father's name is _____
 (Name as shown on birth certificate)
 mother's maiden name is _____
 (First) (Middle) (Surname)

That the name on your spouse 1's birth certificate or certificate of naturalization is

 (First) (Middle) (Surname)

That other names Spouse 1 is using or has used are as follows:

II. (Spouse 2)

(4) That your Spouse 2 is _____

date of birth is _____

place of birth is _____

father's name is _____

(Name as shown on birth certificate)

mother's maiden name is _____

(First)

(Middle)

(Surname)

That the name on your spouse 2's birth certificate or certificate of naturalization is

(First)

(Middle)

(Surname)

That other names spouse 2 is using or has used are as follows:

III.

(5) That your couple is a resident of the State of _____

and the couple's present address is _____

(Residence address)

IV.

(6) That your couple was legally married or were legally licensed in a civil union to each

other on _____ at _____.

(Date)

(City)

(State)

(Country)

V.

(7) That your Spouse 1:

_____ has not been convicted of a felony or a sexual offense.

_____ has been convicted of a felony.

_____ has been convicted of a sexual offense.

Felony or Sexual Offense

Date of Conviction

Disposition

If Petitioner has been convicted of a felony or a sexual offense, respond to the following questions:

1. Fully explain the charges.
2. Fully explain the sentence.
3. Fully explain the terms and conditions of parole or probation.
4. Fully explain the date of final discharge of the sentence.
5. Fully explain whether there was a deferred acceptance of a guilty or no contest plea.
6. Fully explain if there was a pardon, by whom the pardon was granted.

That your Spouse 2:

_____ has not been convicted of a felony or a sexual offense.

_____ has been convicted of a felony.

_____ has been convicted of a sexual offense.

Felony or Sexual Offense

Date of Conviction

Disposition

If Spouse 2 has been convicted of a felony or a sexual offense, respond to the following questions:

1. Fully explain the charges.
2. Fully explain the sentence.
3. Fully explain the terms and conditions of parole or probation.
4. Fully explain the date of final discharge of the sentence.
5. Fully explain whether there was a deferred acceptance of a guilty or no contest plea.
6. Fully explain if there was a pardon, by whom the pardon was granted.

VI.

That this Petition is not filed for the purpose of avoiding payment of debts to creditors; your Petitioners have been and are good law-abiding citizens and your Petitioners state that this Petition for Change of Name is not for wrong or fraudulent purposes.

VII.

That your couple is now requesting that they be permitted to change their names to

(8) _____ and

WHEREFORE, your couple prays that an order be entered herein changing their names

(9) from _____ and _____ to
_____ and _____.

(10) DATED: _____ Hawaii
(City)

(11) _____
Spouse 1 (sign current legal name)

Spouse 2 (sign current legal name)

STATE OF HAWAII)
)
COUNTY OF _____) SS.
(Honolulu, Hawaii, Maui, Kauai)

(12) _____ and

being first duly sworn on oath deposes and says:

That Petitioners are the person named herein, that Petitioners have read the foregoing
Petition, knows the contents thereof, and that the same is true to the best of the Petitioners
knowledge.

(13) _____
Spouse 1 (sign current legal name)

Spouse 2 (sign current legal name)

Subscribed and sworn to before me
this _____ day of _____, 20_____.

(Notary Stamp or Seal)

Notary Public, State of Hawaii
Printed Name: _____
My Commission Expires: _____

Doc. Date: _____	# Pages: _____
Notary Name: _____	___ Circuit
Doc. Description: _____	(Stamp or seal)
_____ Notary Signature	_____ Date

FACT SHEET (Spouse 1)

Each spouse shall answer the following questions fully and completely and submit this FACT SHEET with your Petition for Change of Name.

1. What is the name on your Birth Certificate? Certificate or File No? Dated

2. What is the name on your Certificate of Naturalization? Certificate No? Dated

3. What name appears on your social security card?

4. What name do you use in your employment?

5. List all of your marriages, divorces, dates and places thereof:

Married to Date of Marriage Place of Marriage

Divorced From Date of Divorce Place of Divorce

6. List the names, date and place of birth of all your living children:

Name Date of Birth Place of Birth

7. What is the reason for legalizing this name change?

8. I was born in the State of Hawaii, and wish to have the name on my birth certificate amended in the following way:

Birth Certificate:

First Name Middle Name Last Name

FACT SHEET (Spouse 2)

Each Spouse shall answer the following questions fully and completely and submit this FACT SHEET with your Petition for Change of Name.

1. What is the name on your Birth Certificate? What is the File No? Dated

2. What is the name on your Certificate of Naturalization? What is the No? Dated

3. What name appears on your social security card?

4. What name do you use in your employment?

5. List all of your marriages, divorces, dates and places thereof:
Married to Date of Marriage Place of Marriage

Divorced From Date of Divorce Place of Divorce

6. List the names, date and place of birth of all your living children:
Name Date of Birth Place of Birth

7. What is the reason for legalizing this name change?

8. I was born in the State of Hawaii, and wish to have the name on my birth certificate amended in the following way:

Birth Certificate:

First Name Middle Name Last Name

Name:
Address:
City, State, Zip Code:
Telephone #:

IN THE OFFICE OF THE LIEUTENANT GOVERNOR
STATE OF HAWAII

In the Matter of the Petition)
of)
)
)
_____)
(Spouse 1, current legal name))
and)
)
_____)
(Spouse 2, current legal name))
)
For Name Changes)

NOTICE OF CHANGE OF NAMES

Upon consideration of the Petition of _____
and _____, and there appearing to me to
be good reasons for granting the same:

NOW, THEREFORE, by virtue of the authority vested in me by law and thereunto
enabling, I, Shan S. Tsutsui, Lieutenant Governor of the State of Hawaii, do hereby give public notice
that the names of _____ and
_____ shall be changed to
_____ and
_____ upon a single publication
in the Honolulu Star-Advertiser, a newspaper of general circulation in the State of Hawaii,
published at Honolulu, Hawaii.

DATED: Honolulu, Hawaii _____

SHAN S. TSUTSUI
Lieutenant Governor of the State of Hawaii

ORDER

The Notice of Change of Names of _____
and _____ having been published on
_____ in a newspaper of general circulation in the State of Hawaii, I, Shan S. Tsutsui,
Lieutenant Governor of the State of Hawaii, by virtue of the authority vested in me by law and thereunto
enabling, do hereby order that the name of _____
and _____ be changed to
_____ and _____
effective _____.

Dated: Honolulu, Hawaii _____

SHAN S. TSUTSUI
Lieutenant Governor of the State of Hawaii

SURVEY SHEET ON VOTER REGISTRATION
FOR AMERICAN CITIZENS ONLY
(Spouse 1)

(CHECK ONLY ONE)

_____ I am not a registered voter and I am NOT interested in registering under my new name at this time.
STOP. DO NOT FILL OUT OR SIGN THIS FORM.

_____ I am NOT a registered voter, but would like to register to vote under my new name.

_____ I am a registered voter and would like my name changed on the voter registration list.
PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHANGE FORMS.

_____ I am a registered voter and would like my name and address changed on the voter registration list.
PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHANGE FORM.

When you have your name changed legally, you need to change your voter registration as well. Please fill out the information below and return this form with your name change Petition. When your name change order is signed by the Lieutenant Governor, your voter registration will automatically be updated to reflect your new name.

1. I am a registered voter on _____ (Island)
2. My name is being changed from _____ to _____

3. My residence address is _____
4. My telephone number is (home) _____ (work) _____
5. My mailing address is _____
6. My social security number is _____
7. My date of birth is _____

Signature (New name)

(FOR OFFICE USE ONLY)

Name Change Effective on: _____ Date granted by Lt. Governor _____

SURVEY SHEET ON VOTER REGISTRATION
FOR AMERICAN CITIZENS ONLY
(Spouse 2)

(CHECK ONLY ONE)

_____ I am not a registered voter and I am NOT interested in registering under my new name at this time.
STOP. DO NOT FILL OUT OR SIGN THIS FORM.

_____ I am NOT a registered voter, but would like to register to vote under my new name.

_____ I am a registered voter and would like my name changed on the voter registration list.
PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHANGE FORMS.

_____ I am a registered voter and would like my name and address changed on the voter registration list.
PLEASE COMPLETE THIS FORM, SIGN IT AND RETURN WITH YOUR NAME CHANGE FORM.

When you have your name changed legally, you need to change your voter registration as well. Please fill out the information below and return this form with your name change Petition. When your name change order is signed by the Lieutenant Governor, your voter registration will automatically be updated to reflect your new name.

1. I am a registered voter on _____ (Island)
2. My name is being changed from _____ to

3. My residence address is _____
4. My telephone number is (home) _____ (work) _____
5. My mailing address is _____
6. My social security number is _____
7. My date of birth is _____

Signature (New name)

(FOR OFFICE USE ONLY)

Name Change Effective on: _____ Date granted by Lt. Governor _____