

Form E – Name Change of a Minor by One Parent With the Notarized Consent of the Other Parent

INSTRUCTIONS FOR CHANGE OF NAME

Please read the Instructions for Change of Name carefully or have someone explain them to you. **All forms must be typed.**

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

PETITION

FACT SHEET

NOTICE OF CHANGE OF NAME

ORDER

\$50 NON-REFUNDABLE FILING FEE

A filing fee in the amount of \$50.00 is required for each name change Petition. Once received by the Office of the Lieutenant Governor, this fee is **non-refundable**. 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 7 to 9)

- (1) This is the official heading. Type in the **full, legal name** of the parent filing the Petition. Type the child's full name exactly as it appears on the birth certificate (unless it has been legally changed) in the space after "for and on behalf of."
- (2) Type the full, legal name of the parent filing the Petition.
- (3) Type in all the information requested. Type Petitioner's father's full name and mother's first name and maiden name.
- (4) Type in the child's date of birth, the child's place of birth, and the name of the child as it appears in the heading.
- (5) Type in the full, legal name of the non-petitioning parent and their residence address. For those locations where there are no street addresses, P.O. Boxes may be entered, but please describe the general location of residence.
- (6) Type the minor's name exactly as you want it to appear after it is changed.
- (7) Type the child's name as it appears in the heading and then the name as you want it to be after it is changed.
- (8) Type the date in the first blank. Type the date, either at the time you have it notarized or before you have it notarized. If you date it after the date it is notarized, it will not be processed. Type the name of the city on the second blank.
- (9) Sign the petition in black ink, exactly as it is typed in the heading. **DO NOT USE INITIALS OR NICKNAMES IN THE SIGNATURE.**
- (10) Type in Petitioner's full, legal name.
- (11) Sign petition in black ink in front of a State of Hawaii notary public. **DO NOT USE INITIALS OR NICKNAMES IN THE SIGNATURE.** The notary will complete their portion of this page. Notary Public must be commissioned in the State of Hawaii.

INSTRUCTIONS FOR COMPLETING THE NOTICE OF CHANGE OF NAME (page 12)

- At the top of the page, type your name, address and telephone number in the space provided.
- Type in the full, legal name in the heading exactly as you did on the Petition.
- In the space after “Upon the consideration of the Petition of” type minor child’s name as it appears on the heading.
- In the next space type the exact same name.
- Type child’s new name after “shall be changed to”.

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 OF CHANGE OF NAME and it will be returned to you. **You will be responsible for submitting the NOTICE OF CHANGE OF NAME to the newspaper agency for publication.** The NOTICE OF CHANGE OF NAME must be published in the newspaper and affidavit executed within **sixty (60) calendar days** after it is signed by the Lieutenant Governor.

Failure to publish within the time required automatically voids the Petition for Change of Name.

The newspaper will mail an AFFIDAVIT of publication to our office and a copy of the AFFIDAVIT to you, for your files. If we do not receive an AFFIDAVIT from the newspaper by the end of the sixty (60) days, we will assume that you did not have the NOTICE OF CHANGE OF NAME published and your Petition will be voided at the end of sixty (60) days.

NOTE: The newspaper provides the affidavit, you do not have to provide that form.

INSTRUCTIONS FOR COMPLETING THE ORDER (pages 13 to14)

- Halfway down the page, type your name, address and telephone number in the space provided.
- Type the heading exactly as you did on the Petition.
- In the space after “The Notice of Change of name of” type the child’s name as it appears in the heading.
- Leave the “published on” space blank.
- In the next space, type the child’s name exactly as it appears in the heading.
- After “be changed to” type the child’s new name.
- Leave all other spaces blank.
- Submit one (1) original and five (5) copies of the ORDER to our office along with the original Petition.

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 the original **ORDER** with the Bureau of Conveyances within sixty (60) days after the signing of the **ORDER**. (See H.R.S. 574-6b).

INSTRUCTIONS FOR RETURNING DOCUMENTS

Mail or deliver the documents to:

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

Please do not hesitate to contact our office prior to submitting documents and payment if you have any questions, as the filing fee is non-refundable.

Phone: (808) 586-0255
Website: www.ltgov.hawaii.gov

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

BIRTH CERTIFICATE OR CERTIFICATE OF NATURALIZATION- a *certified* copy of your original birth certificate from the state in which you were born. Certification of the birth certificate must not be older than 90 days prior to submission of your name change Petition. Original Certificate of Naturalization (if applicable) must also be submitted.

If you are not a U.S. Citizen, please provide a photocopy of your passport AND either of the following: (1) foreign birth certificate, which must be translated into English and notarized; (2) family register; or (3) alien registration card. Parents will submit a photocopy of their birth certificates.

PETITION- notarized by a State of Hawaii notary public within 30 days prior to submission of name change forms.

FACT SHEET- completed fact sheet.

NOTICE OF CHANGE OF NAME- one original

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 checks will be accepted. Cash will only be accepted when petitioner hand carries documents into the Office of the Lieutenant Governor.

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

CONSENT FORM- signed by minor child over 10 years of age

ENVELOPES- Please enclose 2 self-addressed stamped envelopes:

1 ea. #10 (regular) envelope with 1 first class stamps

1 ea. large flat manila envelope with \$2.00 stamps

CORRECTIONS- Petitions with liquid paper corrections must be initialed by the notary

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.**

For your information

Regarding the first page of the P E T I T I O N

I.

(3) That your Petitioner is _____;

date of birth is _____;

(petitioner)

place of birth is _____;

(petitioner)

father's name is _____;

(petitioner)

mother's maiden name is _____;

(First)

(Middle)

(Surname)

PETITIONER'S PARENTS (not minor's parents)

IN THE OFFICE OF THE LIEUTENANT GOVERNOR
OF THE STATE OF HAWAII

(1) In the Matter of the Petition)
)
 of)
)
 _____)
 (parent))
)
 for and on behalf of)
)
 _____)
 a minor,)
)
 For Change of Name)
)
 _____)

PETITION

TO THE HONORABLE DOUGLAS S. CHIN, LIEUTENANT GOVERNOR OF THE
STATE OF HAWAII:

(2) COMES NOW _____ your

Petitioner herein, and respectfully pray that an order be entered herein changing the name of the
minor child and in support thereof represent as follows:

I.

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

II.

(5) That your Petitioner is the parent of the minor child herein, born on _____ at _____.

The name on the minor's birth certificate is _____.

III.

(6) That the father/mother of the minor child is _____ who resides at _____; and who has signed notarized consent to change of name of the minor which consent is attached.

IV.

(7) That your Petitioner is now requesting that the name of the minor child be changed to _____.

(8) WHEREFORE, your Petitioner pray that an order be entered herein changing the name of the minor child from _____, to _____.

(9) Dated: _____, Hawaii.
(City)

(9) _____
Petitioner (sign name in full)

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

(10) _____, being first duly sworn on oath depose and says:

That Petitioner is the person named herein, that Petitioner has read the foregoing Petition, knows the contents thereof, and that the same is true to the best of Petitioner's knowledge.

(11) _____
Petitioner (sign name in full)

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

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

(Notary Stamp or Seal)

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

FACT SHEET

(INFORMATION REGARDING THE MOTHER OF MINOR CHILD)

Each Petitioner 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 (**Minor Child**) was born in the State of Hawaii, and wish to have the name on my birth certificate amended in the following way:

_____ _____ _____
First Name Middle Name Last Name

FACT SHEET

(INFORMATION REGARDING THE FATHER OF MINOR CHILD)

Each Petitioner 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:

| <u>Married to</u> | <u>Date of Marriage</u> | <u>Place of Marriage</u> |
|-------------------|-------------------------|--------------------------|
|-------------------|-------------------------|--------------------------|

| <u>Divorced From</u> | <u>Date of Divorce</u> | <u>Place of Divorce</u> |
|----------------------|------------------------|-------------------------|
|----------------------|------------------------|-------------------------|

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

| <u>Name</u> | <u>Date of Birth</u> | <u>Place of Birth</u> |
|-------------|----------------------|-----------------------|
|-------------|----------------------|-----------------------|

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

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

IN THE OFFICE OF THE LIEUTENANT GOVERNOR

STATE OF HAWAII

In the Matter of the Petition)
)
 of)
)
 _____)
 (parent))
)
 for and on behalf of)
)
 _____)
 a minor,)
)
 For Change of Name)
)
 _____)

NOTICE OF CHANGE OF NAME

Upon consideration of the Petition of _____ 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, Douglas S. Chin, Lieutenant Governor of the State of Hawaii, do hereby give public notice
that the name of _____ shall be changed to _____
_____ 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 _____

DOUGLAS S. CHIN
Lieutenant Governor of the State of Hawaii

ORDER

The Notice of Change of Name of _____ having
been published on _____ in a newspaper of general circulation in the State of Hawaii,
I, Douglas S. Chin, 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 _____
be changed to _____ effective _____.

Dated: Honolulu, Hawaii: _____

DOUGLAS S. CHIN
Lieutenant Governor of the State of Hawaii

The following is to be signed by the minor (over the age of ten) and returned with the Petition for change of name.

CONSENT TO CHANGE OF NAME

I, _____, whose parent
(Petitioner) is _____
presently residing at _____, do hereby consent to
having my name changed from _____ to
_____.

DATED: _____

Signature of Minor

Signature of Petitioner

The following is to be filled out and signed before a notary by the non-petitioning parent of the minor child, and filed with the Petition for Change of Name.

CONSENT TO CHANGE OF NAME

I, _____, parent of _____, residing at _____, do hereby consent to having the name of my minor child changed from _____ to _____.

DATED: _____

Parent

State of _____)
)
 County of _____) SS.

On this _____, day of _____ before me personally appeared _____ known to me to be the person described and who executed the foregoing instrument and acknowledged that the same was executed as their free act and deed.

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: _____ | |
| _____ Notary Signature | _____ Date |
| (Stamp or seal) | (Stamp or seal) |