

Form D – Name Change for Family

INSTRUCTIONS FOR CHANGE OF NAME

Please read the Instructions for Change of Name carefully or have someone explain them to you.

All responses must be typed and form cannot be re-typed.

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, SESSION LAWS OF 2007, IF YOU ARE A CONVICTED SEXUAL OFFENDER, WITH AN OBLIGATION TO REGISTER UNDER CHAPTER 846E, HAWAII REVISIED STATUTES, 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

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 11)

- (1) This is the official heading. Type in **full, legal names** of both spouses or civil union partners (Petitioner 1 and Petitioner 2) and their minor children, which would be the names exactly as they appear on the birth certificates, unless it has been legally changed through marriage or other legal name change. **DO NOT TYPE IN THE NAME YOU ARE USING NOW UNLESS IT IS YOUR LEGAL NAME.**
- (2) Type each Petitioner's full, legal names in the spaces provided.
- (3) Type in all information requested for the Petitioner 1. If Petitioner 1's father's name is not listed on the birth certificate, type in "unknown".
- (4) Type in Petitioner 1's name as it appears on birth certificate/certificate of naturalization.
- (5) Type in all other names Petitioner 1 has used even if they were not legal names. If Petitioner 1's name has been changed previously, provide the former name, date and the place where the name change(s) was/were granted. This includes divorced persons whose divorce decree changes their name(s).
- (6) Type in all information requested for the Petitioner 2. If Petitioner 2's father's name is not listed on the birth certificate, type in "unknown".
- (7) Type in Petitioner 2's name as it appears on birth certificate/certificate of naturalization.
- (8) Type in all other names Petitioner 2 has used even if they were not legal names. If Petitioner 2's name has been changed previously, provide the former name, date and the place where the name change(s) was/were granted. This includes divorced persons whose divorce decree changes their name(s).
- (9) Both spouses or civil union partners and their children must be residents of the State of Hawai'i. You must provide a street address. For those locations where there are no street addresses, P.O. Boxes may be entered, but please describe the general location of residence.
- (10) Type in the information requested for all minor children of Petitioners, including those whose names are not being changed.
- (11) Check the appropriate response. If either Petitioner 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.
- (12) Type in the names of the Petitioners exactly as they want them to appear after they are legally changed. Do the same for each of the minor children whose names are being changed.
- (13) Type the names of the Petitioners and minor children as they appear in the heading and then as you want them to appear after they are changed.
- (14) 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 in the second blank.

- (15) Sign petition in black ink in front of a 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 by the State of Hawaii or the military of the United States of America.
- (16) Type the full, legal name of both petitioners.
- (17) **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 of this page.

The **PETITION** for Change of Name must be submitted with the **NOTICE OF CHANGE OF NAME** and **ORDER** properly filled out. The directions for filling out these two documents are provided below.

- 1) **ORDER** (pages 16 & 17) Type in Petitioners' name, address and phone number in the space provided. Type in the full, legal name, one on each line after "In the Matter of the Petition of." Type Petitioners' legal names in the heading exactly as they appear on the Petition. Leave the spaces for dates in the body of the document blank, but type in Petitioners' legal names and new names in the proper spaces. We will fill in the dates of publication. Submit one (1) original and five (5) copies of the **ORDER** to our office along with the **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 a copy of the ORDER with the Bureau of Conveyances within sixty (60) days after the signing of the ORDER, (See H.R.S. §574-6(b)).

- 2) **NOTICE OF CHANGE OF NAME** (pages 18 & 19) At the top left-hand corner type your name and address in the space provided. Type in Petitioners' legal names in the heading exactly as they appear on the Petition. Type Petitioners' legal names in the space provided in the body of the document and then the names as you wish them 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 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 a newspaper of general circulation in the State of Hawai'i 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 sixty (60) days, we will assume that you did not have the NOTICE OF CHANGE OF NAME published and your PETITION will be voided.

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

INSTRUCTIONS FOR COMPLETING THE NOTICE OF CHANGE OF NAME (pages 20 to 21)

- At the top of the page, type Petitioners' names, address and telephone number in the space provided.
- Type the heading exactly as you did in the Petition"
- In the space after "Upon the consideration of the Petition of" type the Petitioners' full legal names as they appear on the heading.
- Type the Petitioners' and child(ren)'s full names exactly as they appear on the birth certificates (unless they have been legally changed) in the spaces after "the names of".
- Type the Petitioners' and child(ren)'s new names 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 a newspaper of general circulation in the State of Hawai'i 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 18 to 19)

- Halfway down the page, type in Petitioners' names, addresses and telephone numbers in the space provided.
- Type the heading exactly as it appears on the Petition.
- Type the petitioner and child(ren)'s full names exactly as they appear on the birth certificates (unless they have been legally changed) in the space after "the notice of change of names of".
- Leave the "published on" space blank.
- In the next spaces, type the petitioners and child(ren)'s names exactly as they appear in the heading, and then the names you want them to be after they are changed.
- 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. §574-6(b)).

INSTRUCTIONS FOR SUBMITTING DOCUMENTS

Mail or deliver the documents to:

Office of the Lieutenant Governor
Hawai'i State Capitol
415 South Beretania Street, 5th Floor
Honolulu, Hawai'i 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 Office of the Lieutenant Governor:

BIRTH CERTIFICATE OR CERTIFICATE OF NATURALIZATION- a certified copy of original birth certificate of each spouse or civil union partner and their children from the state in which they 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 either spouse or civil union partner or their children are not a U.S. Citizen, please provide a photocopy of their passport AND either of the following: (1) a certified copy of foreign birth certificate, which must be translated and submitted with notarized certificate of translation; (2) a certified copy of family register, which must be translated and submitted with notarized certificate of translation; or (3) a photocopy of alien registration card.

PETITION – notarized by a notary commissioned by the State of Hawaii or the military of the United States of America 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 (pgs. 18 & 19)

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 the 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 – Consent Form, signed by minor child(ren) if over 10 years of age.

ENVELOPES- Please enclose 2 self-addressed-stamped-envelopes:

1 each- #10 (regular) envelope with 1 first class stamp.

1 each- large flat manila envelope with \$2.00 stamps

CORRECTIONS- Petitions with corrections must be initialed by the notary public.

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

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 PETITION

I.
Petitioner 1

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

II.
Petitioner 2

That your Petitioner is _____;
date of birth is _____;
(petitioner)
place of birth is _____;
(petitioner)
Petitioner 2's father's name is _____;
(petitioner) (Name as shown on birth certificate)
Petitioner 2's mother's maiden name is _____;
(First) (Middle) (Surname)

IN THE OFFICE OF THE LIEUTENANT GOVERNOR
OF THE STATE OF HAWAI'I

In the Matter of the Petition)
)
 of)
)
(1) _____)
 (Petitioner 1))
 and)
)
 _____)
 (Petitioner 2))
 for themselves and for and on behalf of)
)
 _____)
)
 _____)
)
 _____)
 minor children,)
)
 For Change of Names)
 _____)

PETITION

TO THE HONORABLE JOSHUA B. GREEN, LIEUTENANT GOVERNOR OF THE STATE OF HAWAI'I:

(2) COMES NOW _____
(Petitioner 1)

and _____ your Petitioners herein, and respectfully
(Petitioner 2)

pray that an order be entered herein changing their names and the names of their minor child and in support thereof represent as follows:

I. (Petitioner 1)

(3) That your Petitioner 1 is _____, whose date of
birth is _____;

place of birth is _____;

Petitioner 1's father's name is _____;
(First, middle, and surname)

Petitioner 2's mother's name is _____;
(First, middle, and surname)

(4) That the name on your Petitioner 1's birth certificate/certificate of naturalization is

_____.

(5) That other names your Petitioner 1 is using or has used are as follows:

_____.

II. (Petitioner 2)

(6) That your Petitioner 2 is

→

date of birth is _____;

place of birth is _____;

Petitioner 2's father's name is _____;
(First, middle, and surname)

Petitioner 2's mother's name is _____;
(First, middle, and surname)

(7) That the name on your Petitioner 2's birth certificate/certificate of naturalization is

_____.

(8) That other names your Petitioner 2 is using or has used are as follows:

_____.

III.

(9) That your Petitioners' residence is in the State of Hawai'i

and their present address is _____.
(residential address)

IV.

That your Petitioners are the parents of the following minor children:

	<u>Name on Birth Certificate</u>	<u>Date of Birth</u>	<u>Place of Birth</u>
(10)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

V.

(11) That your Petitioner 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 1 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, and by whom the pardon was granted.

That your Petitioner 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 Petitioner 2 has been convicted of a felony, 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, and 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.

(12) That your Petitioners are now requesting that they be permitted to change their names to _____ and _____,
(Petitioner 1) (Petitioner 2)
and of their minor children to _____,
_____ and _____.

WHEREFORE, your Petitioners pray that an order be entered herein changing the names as follows:

(13) FROM TO

(14) _____
DATED: _____, Hawai'i.

(15) _____
Petitioner 1(sign name in full)

Petitioner 2(sign name in full)

State of _____)
County of _____) SS.

(16) _____ and
(Petitioner 1)
_____ being first duly sworn on oath depose
(Petitioner 2)
and say:

That they are the Petitioners named herein, that they have read the foregoing Petition,
know the contents thereof, and that the same are true to the best of their knowledge.

(17) _____
(Sign Name in Full)
Print Name _____
Petitioner 1

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

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

(Notary Stamp or Seal)

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

(Sign name in full) _____

Print Name _____

Petitioner 2

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

(Notary Stamp or Seal)

Notary Public, State of _____

Printed Name: _____

My Commission Expires: _____

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

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

CONSENT TO CHANGE OF NAME

I, _____, whose parents (Petitioners) are
_____ and _____
presently residing at _____,
do hereby consent to having my name changed from _____
to _____.

DATED: _____

Signature of Minor

Signature of Petitioner 1

Signature of Petitioner 2

CONSENT TO CHANGE OF NAME

I, _____, whose parents (Petitioners) are
_____ and _____
presently residing at _____,
do hereby consent to having my name changed from _____
to _____.

DATED: _____

Signature of Minor

Signature of Petitioner 1

Signature of Petitioner 2

FACT SHEET

(INFORMATION REGARDING THE PETITIONER 1)

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>
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<u>Divorced From</u>	<u>Date of Divorce</u>	<u>Place of Divorce</u>
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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?

8. I was born/married in the State of Hawai'i, and wish to have the name on my birth certificate amended in the following way:

First Name

Middle Name

Last Name

9. I (Minor Child) was born in the State of Hawai'i, and wish to have the name on my birth certificate amended in the following way:

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

FACT SHEET

(INFORMATION REGARDING PETITIONER 2)

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 was born in the State of Hawai'i, and wish to have the name on my birth certificate amended in the following way:

First Name

Middle Name

Last Name

)
)
)

The Notice of Change of Names of _____,

_____ , _____,

and _____ having been published on _____ in a

newspaper of general circulation in the State of Hawai'i, I, JOSHUA B. GREEN, Lieutenant Governor of the State

of Hawai'i, by virtue of the authority vested in me by law and thereunto enabling, do hereby order that the

names of _____ , _____,

_____ , and _____

shall be changed to _____ , _____,

_____ , and _____ effective _____.

Dated: Honolulu, Hawai'i: _____

JOSHUA B. GREEN
Lieutenant Governor of the State of Hawai'i

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

IN THE OFFICE OF THE LIEUTENANT GOVERNOR
STATE OF HAWAI'I

In the Matter of the Petition)
)
 of)
)
 _____)
 and (Petitioner 1))
)
 _____)
 (Petitioner 2)
 for themselves and for and on behalf of)
)
 _____)
)
 _____)
)
 _____)
 minor children)
)
 For Change of Names)
)

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, JOSHUA B. GREEN, Lieutenant Governor of the State of Hawai'i, 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 Hawai'i, published in Honolulu, Hawai'i.

DATED: Honolulu, Hawai'i _____

JOSHUA B. GREEN
Lieutenant Governor of the State of Hawai'i

PETITIONER 1
SURVEY SHEET ON VOTER REGISTRATION
FOR AMERICAN CITIZENS ONLY

(CHECK ONLY ONE OF THESE)

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 CHNAGE
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 update to reflect your new name.

1. I am registered to vote on _____
(Island)
2. My name is being changed from _____
to _____
3. My residence address is _____
4. My telephone number is (H) _____ (B) _____
5. My mailing address is _____
6. My social security number is _____
7. My date of birth is _____

Signed, _____
(New Name)

(FOR OFFICE USE ONLY)

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

PETITIONER 2
SURVEY SHEET ON VOTER REGISTRATION
FOR AMERICAN CITIZENS ONLY

(CHECK ONLY ONE OF THESE)

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 CHNAGE
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 update to reflect your new name.

1. I am registered to vote on _____
(Island)
2. My name is being changed from _____
to _____
3. My residence address is _____
4. My telephone number is (H) _____ (B) _____
5. My mailing address is _____
6. My social security number is _____
7. My date of birth is _____

Signed, _____
(New Name)

(FOR OFFICE USE ONLY)

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