

Request for a **criminal conviction history by a third party**

You are asking for another person's criminal conviction history. The person (applicant) must fill in pages 2-4 of this form themselves and sign and date the declaration statement. This tells us we can give their criminal conviction history to you. You, as the third party, are responsible for ensuring the information provided on this form is complete and the identification provided is valid.



This form may be filled in by typing the information in the fields of the PDF or by printing the form and handwriting the information. (Do not photocopy the form). If handwriting, please use a BLACK ballpoint pen and write in CAPITAL letters inside the boxes provided. If typing, the form must be printed and signed before it is mailed back to us. Scanned and emailed forms will not be accepted.

You should mail the signed form, along with the copy of the applicant's ID to: Criminal Record Applications, EX11049, Auckland, New Zealand.

Third party details

Third party name

Your reference

Add your own reference for this request (if applicable)

Type of report All convictions Traffic only *(please tick one)*

Are you a registered customer? Yes – add your customer ID here

No – please also complete the non-registered customer details section below

Third party signature

Date signed

Applicant's details

As the applicant, you complete this section, so that the Ministry of Justice can provide a copy of your criminal conviction history to which the provisions of the Criminal Records (Clean Slate) Act 2004 apply. TIMG New Zealand Ltd (Freightways House, 32 Botha Rd, Penrose) will collect this request information on behalf of the Ministry of Justice and provide it to us for this purpose. This report will be provided to the third party named on page 1 of this application form. If the information on this form is not complete or incorrect, we will not be able to process this request.



Please fill in this form by typing information in the fields of the PDF or by printing the form and handwriting the information. If handwriting, please use a BLACK ballpoint pen and write in CAPITAL letters inside the boxes provided. If typing, you must print the form and sign and date it.

Your personal details

Surname

First name

Middle names
Leave a space between names

Date of birth

Your gender Male Female Do not want to state

New Zealand driver licence *If you have a current NZ driver licence please enter your licence number here*



Make sure that the name and date of birth above matches the identification that you provide with your application.

Previous names

Include maiden names and any other names you are known as, or have used

Surname

First name

Middle names

Surname

First name

Middle names

Surname

First name

Middle names

Surname

First name

Middle names

If you have more than 4 previous names please contact us at criminalrecord@justice.govt.nz

Your postal/contact details



Please use a BLACK ballpoint pen and write in CAPITAL letters inside the boxes provided.

PO Box no.	<input type="text"/>	or unit or street number	<input type="text"/>
Street name	<input type="text"/>		
Suburb	<input type="text"/>		
Town/city	<input type="text"/>		
State	<input type="text"/>		
Postcode	<input type="text"/>		
Country	<input type="text"/>		
Email	<input type="text"/>		
Home phone	<input type="text"/>	Mobile	<input type="text"/>

Residential addresses

List below your current residential address (if different from above)

Street address:	<input type="text"/>		
Suburb:	<input type="text"/>		
Town/city	<input type="text"/>	Postcode	<input type="text"/>
Country	<input type="text"/>		

List any other New Zealand addresses you have lived at in the past 10 years

Street address:	<input type="text"/>		
Suburb:	<input type="text"/>		
Town/city	<input type="text"/>	Postcode	<input type="text"/>

Street address:	<input type="text"/>		
Suburb:	<input type="text"/>		
Town/city	<input type="text"/>	Postcode	<input type="text"/>

Street address:	<input type="text"/>		
Suburb:	<input type="text"/>		
Town/city	<input type="text"/>	Postcode	<input type="text"/>

Street address:	<input type="text"/>		
Suburb:	<input type="text"/>		
Town/city	<input type="text"/>	Postcode	<input type="text"/>

Your identification



Please attach a clear copy of your identity document from the list below (choose only one). It must show your signature. Please tick the box below to show which type of document you are providing.

New Zealand driver licence – this must be current or can have expired within the last 2 years. We do not accept cancelled, defaced or temporary licences.

New Zealand passport – this must be current or can have expired within the last 2 years. We do not accept cancelled or defaced passports.

Overseas passports – this must be current and cannot be expired, cancelled or defaced.

New Zealand firearms licence – this must be current and cannot be expired, cancelled or defaced.

Proof of identity – If you do not have any of the above forms of identity, you may have someone complete a “proof of identity” on your behalf. They must complete the Proof of Identity form which can be downloaded from <http://www.justice.govt.nz/criminal-records/get-someone-elses/>. This person must:

- ✓ have known you for more than 12 months
- ✓ be aged 18 years or over
- ✓ be contactable during business hours
- ✗ not be a relative (either by blood or marriage), and
- ✗ not live at the same address.

If you are unable to provide any of the above forms of identification and don't know anyone who can provide a proof of identity, please contact us at criminalrecord@justice.govt.nz

Do you want to receive a copy of this report

Tick this box if you want to receive a copy of the report which we will give to the third party Yes No

If you have ticked the box above, how do you want to receive your report? Email Mail

Declaration

I have filled in this application myself

I had help filling in this form because I have a disability or language difficulty

By signing this declaration:

I declare that the information I have given in this application is, to the best of my knowledge, true, complete and correct.

I understand if I have provided incorrect or incomplete information, the Ministry of Justice may not be able to provide an accurate record of my convictions.

I authorise the Ministry of Justice to provide a copy of my criminal conviction history to the third party named on page 1.

Sign & date your declaration below, this must be handwritten. Computer generated signatures cannot be accepted.

The Ministry of Justice does not process applications where the date of the signature is older than 6 months.

Signature

Date signed

D	D	M	M	Y	Y	Y	Y
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Full name



Service Standard: The Ministry of Justice will process all complete and correct requests within 20 working days from receipt. This does not include postage time.