

Civil Court of the City of New York

County of _____

Index Number _____

In the Matter of the Application of _____

**PETITION FOR
FAMILY
CHANGE OF NAME**

for Leave to Change Their Name(s) To _____

_____, (and _____), by this petition, allege(s)
Primary Adult (Second Adult, if any)

1. The present family name is: _____.

2. The new name which we propose to assume in place and stead of the present name is:
_____.

3. The individuals* whose names are included in this application are incorporated herewith are as follows:

<u>Present Name</u>	<u>Proposed Name</u>	<u>Place of Birth</u>	<u>Date of Birth</u>	<u>Present Age</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Primary Adult (and Secondary Adult, if any) and all minors under the age of 18 should be listed. Minors between the ages of 14 and 18 must consent to this change by signing the Consent on page 2.*

4. The disclosure and publication of this name change would **jeopardize one/all of the applicant's personal safety**
YES _____ **NO** _____ **because** _____

5. One/some/all of the above named applicants have been convicted of a crime, adjudicated a bankrupt, or there is/are judgments or liens against an applicant, or there is/are actions or proceedings pending against an applicant, or an applicant has an obligation(s) for child and/or spousal support. YES* _____ NO _____

**If the answer to any part of this statement is YES for any applicant, each applicant who answers YES must fill out a CIV-GP-82F supplemental form.*

6. Our present residence is: _____

7. The reasons for this application are as follows: _____

8. WHEREFORE, your Petitioner(s) respectfully request(s) that an Order be granted permitting this requested change of name.

Date

Signature of Petitioner

Signature of Second Adult

CONSENTS

I, _____, am 14 years of age or over, and less than 18 years of age, and I have read the annexed petition for family change of name, and I consent to the same.

Date

Signature

I, _____, am 14 years of age or over, and less than 18 years of age, and I have read the annexed petition for family change of name, and I consent to the same.

Date

Signature

I, _____, am 14 years of age or over, and less than 18 years of age, and I have read the annexed petition for family change of name, and I consent to the same.

Date

Signature

I, _____, am 14 years of age or over, and less than 18 years of age, and I have read the annexed petition for family change of name, and I consent to the same.

Date

Signature

VERIFICATION

State of New York, County of _____ ss.:

_____, being duly sworn, deposes and say(s):
s/he/they is(are) the petitioner(s) named above, that s/he/they has/have read the petition and know(s) the truth of the contents thereof except for those matters alleged to be on information and belief, and as to those matters, s/he/they believe(s) them to be true, and that the signature(s) of the consenting party (parties) above is/are the true signature(s) of the minor child(ren) who is/are included in the petition.

Signature of Petitioner

Signature of Second Adult

Sworn to before me this ____ day of _____, 20__

Sworn to before me this ____ day of _____, 20__

Signature of Notary Public

Signature of Notary Public