



Jersey

CREMATION (JERSEY) REGULATIONS 1961

Official Consolidated Version

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Jersey

CREMATION (JERSEY) REGULATIONS 1961¹

THE STATES in pursuance of Article 3 of the [Cremation \(Jersey\) Law 1953](#), have made the following Regulations –

Commencement [[see endnotes](#)]

1 Interpretation²

In these Regulations –

“Medical Officer of Health” means the ‘Inspecteur Médical’ appointed under Article 10 of the [Loi \(1934\) sur la Santé Publique](#);

“medical referee” means –

- (a) the Medical Officer of Health; or
- (b) a person appointed a medical referee by the Minister under Regulation 2A;

“Minister” means the Minister for Health and Social Services;

“registered medical practitioner” has the same meaning as in the Medical Practitioners (Registration) (Jersey) Law, 1960;

“relevant registrar” and “Superintendent Registrar” have the meanings respectively assigned to them in the [Marriage and Civil Status \(Jersey\) Law 2001](#).

2 Control of crematorium to vest in Minister³

The control and administration of the crematorium is vested in the Minister.

2A Power of Minister to appoint medical referees⁴

- (1) The Minister may appoint as a medical referee any person recommended by the Medical Officer of Health to the Minister for such appointment.
- (2) The Medical Officer of Health must not recommend a person for appointment as a medical referee unless satisfied that the person –
 - (a) is a registered medical practitioner of at least 5 years’ standing; and

- (b) in the opinion of the Medical Officer of Health, has the character, experience and qualifications to discharge the duties required of a medical referee under these Regulations.⁵

3 Maintenance of crematorium⁶

The Minister must take the steps that are necessary to ensure that the crematorium is at all times –

- (a) maintained in good working order;
- (b) provided with a sufficient number of attendants; and
- (c) kept in a clean and orderly condition.

4 Restrictions on carrying out of cremation

- (1) ⁷
- (2) Except in a case where an inquest has been held, a person must not cremate any human remains which have not been identified.⁸
- (3) Except in such a case as is mentioned in Regulation 9, a cremation must not be authorised until the death of the deceased has been duly registered in accordance with the provisions of the [Marriage and Civil Status \(Jersey\) Law 2001](#).⁹
- (4) Except as otherwise provided in these Regulations, a cremation must not be authorised unless application has been made in accordance with the following provisions of these Regulations.¹⁰

5 Application for cremation

- (1) An application for cremation must be made to a medical referee in the form set out in Schedule 1.¹¹
- (2) The application must be made by –
 - (a) an executor; or
 - (b) a near relative of the deceased.¹²
- (2A) But the application may be made by another person, if the medical referee considering the application is satisfied with the reason they give for making the application instead of an executor or a near relative.¹³
- (3) The application must be verified by the countersignature of –
 - (a) a person who has a registration card issued under Article 4 of the [Control of Housing and Work \(Jersey\) Law 2012](#);
 - (b) a person who has been ordinarily resident in Jersey for a continuous period of at least 3 months;
 - (c) a Jurat of the Royal Court;
 - (d) a member of the States;
 - (e) an advocate or solicitor;
 - (f) a notary public;

- (g) a minister of religion; or
 - (h) a Centenier.¹⁴
- (4) The countersignatory must not be –
- (a) a relative, spouse or civil partner of, or in an enduring relationship with, the applicant; or
 - (b) a relative, surviving spouse or surviving civil partner of, or an individual who was in an enduring relationship with, the deceased at the time of death.¹⁵
- (5) The countersignatory must certify that –
- (a) the applicant is known to them; and
 - (b) they have no reason to doubt the truth of any of the information provided by the applicant.¹⁶
- (6) In this Regulation –
- “enduring relationship” means a relationship that –
- (a) is similar to a marriage or civil partnership; and
 - (b) has existed, without breaking down, for a continuous period of at least 2 years;
- “minister of religion” means a person who –
- (a) performs functions in connection with a religion; and
 - (b) holds an office or appointment in, or is accredited, approved or recognised for purposes of, a relevant organisation in relation to a religion;
- “member of the States” has the meaning given in Article 1(1) of the [States of Jersey Law 2005](#);
- “near relative” means –
- (a) the surviving spouse or surviving civil partner of the deceased;
 - (b) a parent or child of the deceased;
 - (c) any other relative usually residing with the deceased; or
 - (d) if the deceased is a stillborn child, their parent;
- “relevant organisation” means an organisation whose sole or main purpose is not commercial, with 1 or more of the following purposes –
- (a) to practise a religion;
 - (b) to advance a religion;
 - (c) to teach the practice or principles of a religion;
 - (d) to enable people of a religion to receive benefits, or to engage in activities, within the framework of that religion;
 - (e) to foster or maintain good relations between people of different religions.¹⁷

6 Certificates to accompany application¹⁸

Subject to the provisions of these Regulations, a cremation is not permitted to take place unless the application is accompanied by –

- (a) a certificate, in the form set out in Schedule 2, signed by a registered medical practitioner who attended the deceased during the deceased's last illness and who can certify definitely the cause of death, together with a confirmatory medical certificate, in the form set out in Schedule 3, signed by another registered medical practitioner who has been registered as a fully registered medical practitioner under the Medical Act 1983 of the United Kingdom for a period of not less than 5 years, being neither a relative of the deceased nor a relative or partner of the practitioner who signed the first-mentioned certificate;
- (b) in a case where, in accordance with the provisions of Articles 17 and 18 of the [Inquests and Post-Mortem Examinations \(Jersey\) Law 1995](#) a post-mortem examination has been made and a certificate stating the cause of death has been authorized to be delivered to the relevant registrar, a certificate in the form set out in Schedule 4 to these Regulations, signed by the registered medical practitioner who made the examination; or
- (c) in a case where an inquest has been held or opened, a certificate, in the form set out in Schedule 5, signed by the Viscount.

7 Powers and duties of medical referee¹⁹

(1) A medical referee must not permit a cremation to take place unless satisfied –

- (a)
- (b) except in such a case as is mentioned in Regulation 9, that the death of the deceased has been registered in accordance with the provisions of the [Marriage and Civil Status \(Jersey\) Law 2001](#);
- (c) that the application and certificates produced in support of the application meet the requirements of these Regulations and that the enquiry made by the persons signing the certificates has been adequate; and
- (d) that the fact and cause of death have been definitely ascertained.²⁰

(2) The medical referee considering an application under Regulation 5 must give the authorisation to cremate in the form set out in Schedule 6 if satisfied that –

- (a) all the requirements of these Regulations have been met; and
- (b) there are no grounds for refusing cremation under Regulation 8.²¹

8 Refusal to allow cremation²²

The medical referee considering an application under Regulation 5 must refuse to allow a cremation and must refer the matter to the Viscount if –

- (a) it appears to the medical referee from the cause of death assigned in the medical certificates accompanying the application that the death has, or might have, resulted from poison, violence, an illegal operation, privation or neglect; or

- (b) the circumstances give rise to any suspicion on the part of the medical referee.

9 Persons dying outside Jersey²³

- (1) This Article applies if –
 - (a) a person dies in a place outside Jersey; and
 - (b) the Viscount has authorised the landing of the remains in Jersey.
- (2) A medical referee may accept –
 - (a) an application containing the particulars prescribed in the form set out in Schedule 1, if it is accompanied by a declaration by the applicant, made before any person that has authority in the place of death to administer an oath or take a declaration, that the particulars in the form are true to the best of the applicant's knowledge or belief; and
 - (b) certificates in the forms set out in Schedules 2, 3 and 4, if they are signed by medical practitioners who are shown to a medical referee's satisfaction to possess qualifications substantially equivalent to those prescribed by these Regulations in respect of those certificates.
- (3) But, if the Viscount is satisfied that the case is one in which cremation may properly take place, the Viscount may authorise a medical referee to grant the application despite the certificates required to accompany the application under Regulation 6 not having been produced.

10 Cremation of remains of stillborn child²⁴

A medical referee may permit the cremation of the remains of a stillborn child on production of a copy of the relevant entry in the Register of Stillbirths, signed by the relevant registrar.

11 Modification and suspension of Regulations

- (1) The Minister may suspend or modify any of the provisions of these Regulations during an outbreak in Jersey of any epidemic, endemic or infectious disease.
- (2) Where the remains of a deceased person have been buried for not less than 12 months, Regulations 5, 6 and 7 do not apply, and such remains may be cremated subject to any conditions which may be imposed by the Minister and to any conditions which may be imposed by the Viscount on the grant of the certificate authorizing the exhumation of the remains.²⁵

12 Disposal of ashes

- (1) After cremation, the ashes must, if so requested, be given into the charge of the person who applied for the cremation.²⁶
- (2) If no such request is made, the Minister must cause the ashes to be retained, and, in the absence of any special arrangement for their burial or preservation, they must either be decently interred in a burial ground or scattered on land reserved for the burial or scattering of ashes.²⁷

13 Registration of cremations, etc.

- (1) A register of all cremations carried out at the crematorium, in the form set out in Schedule 7, must be kept at the crematorium, and, as soon as may be after a cremation has taken place, the cremation must be registered by a person appointed by the Minister for that purpose and a copy of the entry in the register must be delivered to the Superintendent Registrar.²⁸
- (2) The [Marriage and Civil Status \(Jersey\) Law 2001](#) applies –
 - (a) in relation to the register of cremations, in the same way that it applies to registers kept under that Law; and
 - (b) in relation to copies of entries in the register of cremations, in the same way that it applies to copies of entries in registers kept under that Law.²⁹

14 Keeping of certificates, etc.³⁰

The application form, medical certificates and other forms specified in Schedules 1, 2, 3, 4, 5 and 6 must be kept at the crematorium for a period of not less than 10 years, after which they may be destroyed in the manner directed by the Medical Officer of Health.

15 Citation

These Regulations may be cited as the Cremation (Jersey) Regulations 1961.

SCHEDULE 1³¹

(Regulation 5(1))

Application for cremation**Your details (the applicant)**

The application must be made by an executor or by a near relative of the deceased. The application may be made by another person if the medical referee considering the application is satisfied with the reason they give for making the application instead of an executor or a near relative.

("Near relative" means the surviving spouse or surviving civil partner of the deceased, a parent or child of the deceased, any other relative usually residing with the deceased, or, if the deceased is a stillborn child, their parent.)

Applicant's full name	
Address	
Telephone number	E-mail address
Are you an executor, or a near relative of the deceased? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, state: (a) your relationship to the deceased (b) the reason why you are making the application instead of an executor or a near relative	
Is there any executor or near relative who has not been informed of the proposed cremation?	
Has any executor or near relative of the deceased expressed any objection to the proposed cremation? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please give details.	

Details of the deceased

Full name of the deceased
Residential address at date of death
Occupation at date of death. Last occupation if retired or not in work at date of death

Age at death	Sex at death
Civil status at date of death	
<input type="checkbox"/> Married <input type="checkbox"/> Civil partnership <input type="checkbox"/> Widow/widower/surviving civil partner <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Civil partnership dissolved	
What was the date and time of the death of the deceased?	
Date	Time
Place of death. (Give address and state whether own residence, lodgings, hotel, hospital, nursing home, etc.)	
Do you know, or have you any reason to suspect, that the deceased's death was due, directly or indirectly, to: (Give separate answers to (a) (b) and (c))	(a) violence
	<input type="checkbox"/> No <input type="checkbox"/> Yes, please give reasons for your answer
	(b) poison
	<input type="checkbox"/> No <input type="checkbox"/> Yes, please give reasons for your answer
	(c) privation or neglect
	<input type="checkbox"/> No <input type="checkbox"/> Yes, please give reasons for your answer
Do you know, or have you any reason to suspect, that the death of the deceased occurred while they were under an anaesthetic?	
<input type="checkbox"/> No <input type="checkbox"/> Yes, please give reasons from you answer	
Do you know any reason whatever for supposing that an examination of the remains of the deceased may be desirable?	
<input type="checkbox"/> No <input type="checkbox"/> Yes, please give reasons for your answer	

Registered medical practitioner(s) who attended the deceased

Name(s) of registered medical practitioner(s)

Address(es)	
Telephone number(s)	E-mail address(es) (if known)

Medical implants

At the time of death, was there any implant present in the body that may become hazardous when the body is cremated?

- No
 Yes
 Unsure

- (a) Pacemaker
(b) Implantable Cardioverter Defibrillators (ICD)
(c) Implantable loop recorder
(d) 'Fexion' intramedullary nails
(e) Radioactive device
(f) Any other implant

Please give details of the implant and its location

Statement of truth

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

Signature	Date
Name	

Countersignatory

The application must be verified by the countersignature of:

(Indicate the capacity in which you are countersigning)

- an individual who has a registration card issued under Article 4 of the Control of Housing and Work (Jersey) Law 2012
 an individual who has been ordinarily resident in Jersey for a continuous period of at least 3 months
 a Jurat of the Royal Court
 a member of the States
 an advocate or solicitor
 a notary public
 a minister of religion

a Centenier

I confirm that:

- I believe that I am eligible to verify this application for cremation;
- I was not, at the time of their death, a relative of, spouse or civil partner of, or in an enduring relationship (similar to a marriage or civil partnership for a continuous period of at least 2 years) with the deceased;
- I am not a relative of, spouse or civil partner of, or in an enduring relationship (similar to a marriage or civil partnership for a continuous period of at least 2 years) with the applicant;
- the applicant is known to me;
- I have no reason to doubt the truth of any of the information provided by the applicant.

Signature	Date
Name	
Address	

SCHEDULE 2

(Regulation 6(a))

CERTIFICATE OF MEDICAL ATTENDANT

I am informed that application is about to be made for the cremation of the remains of –

(name of deceased)

(address)

(occupation)

Having attended the deceased before death, and seen and identified the body after death, I give the following answers to the questions set out below –

1 On what date, and at what hour did he or she die?

2 What was the place where the deceased died?

(Give address and say whether own residence, lodgings, hotel, hospital, nursing home, etc.)

3 Are you a relative of the deceased? If so, state the relationship.

4 Have you, so far as you are aware, any pecuniary interest in the death of the deceased?

5 Were you the ordinary medical attendant of the deceased? If so, for how long?

6 Did you attend the deceased during his or her last illness? If so, for how long?

7 When did you last see the deceased alive? (Say how many days or hours before death.)

8 How soon after death did you see the body, and what examination of it did you make?

9 What was the cause of death?

(a) Disease or condition directly leading to death (a) due to (or as a consequence of)

(This does not mean the mode of dying, such as e.g., heart failure, asphyxia, asthenia, etc., it means the disease, injury or complication which caused death.)

_____ (b) Antecedent causes _____ (b)

- (c) Morbid conditions, if any, giving rise to the above cause stating the underlying condition last due to (or as a consequence of)
- (c)

What was its duration in years, months or days?

10 Was there any other cause which contributed to or accelerated death ? If so, state it, and if more than one other cause, state them all.

11 What was the mode of death ? (Say whether syncope, coma, exhaustion, convulsions, etc.)

What was its duration in days, hours or minutes ?

12 State how far the answers to the last 3 questions are the result of your own observations, or are based on statements made by others. If on statements made by others, say by whom.

13 Did the deceased undergo any operation during the final illness or within a year before death ? If so, what was its nature, and who performed it ?

14 By whom was the deceased nursed during his or her last illness ? (Give names, and say whether professional nurse, relative, etc. If the illness was a long one, this question should be answered with reference to the period of 4 weeks before the death.)

15 Who were the persons (if any) present at the moment of death ?

16 In view of the knowledge of the deceased's habits and constitution, do you feel any doubt whatever as to the character of the disease or the cause of death ?

17 Do you know, or have you any reason to suspect, that the death of the deceased was due, directly or indirectly, to –

- (a) violence;
.....
- (b) poison;
.....
- (c) privation or neglect?
.....

(Give separate answers to (a) (b) and (c))

18 Do you know, or have you any reason to suspect, that the death of the deceased occurred while the deceased was under an anaesthetic ?

19 Have you any reason whatever to suppose a further examination of the body to be desirable ?

20 Have you given the certificate required for registration of death ?

I certify that the answers given above are true and accurate to the best of my knowledge and belief, and that there is no circumstance known to me which can give rise to any suspicion that the death was due wholly or in part to any other cause than

(disease).....

(accident).....

and that there is no circumstance of any sort known to me which makes it undesirable that the body should be cremated.

(Signature).....

(Address).....

(Registered qualifications).....

(Date).....

SCHEDULE 3

(Regulation 6(a))

CONFIRMATORY MEDICAL CERTIFICATE

I have examined the foregoing medical certificate, and have made personal inquiry as stated in my answers to the questions set out below –

- 1 Have you seen the body of the deceased ?
- 2 Have you carefully examined the body externally ?
- 3 Have you made a post-mortem examination ?
- 4 Have you seen and questioned the medical practitioner who gave the above certificate ?
- 5 Have you seen and questioned any other medical practitioner who attended the deceased ?
- 6 Have you seen and questioned any person who nursed the deceased during his or her last illness, or who was present at the death ?
- 7 Have you seen and questioned any of the relatives of the deceased ?
- 8 Have you seen and questioned any other person ?

(In the answers to questions 5, 6, 7 and 8, give names and addresses of persons seen and say whether you saw them alone.)

I am satisfied that the cause of death was
.....and I certify that I know of no circumstances which can give rise to any suspicion that death was due wholly or in part to any other cause than
(*disease*) (*accident*) and that there is no circumstance of any sort known to me which makes it undesirable that the body should be cremated.

(*Signature*).....

(*Address*).....

.....
(*Registered qualifications*)

(*Date*).....

SCHEDULE 4

(Regulation 6(b))

CERTIFICATE AFTER POST-MORTEM EXAMINATION³²

I certify that, acting on the direction of the Viscount, I made a post-mortem examination of the remains of

(*name*).....

(*address*).....

(*occupation*).....

The result of the examination is as follows –

I am satisfied that the cause of death was
and that there is no reason for making any toxicological analysis or for the holding of an inquest.

(*Signature*).....

(*Address*).....

.....
(*Registered qualifications*)

(*Date*).....

(*Office*).....

.....

SCHEDULE 5

(Regulation 6(c))

VISCOUNT’S CERTIFICATE³³

I certify that I held/opened an inquest on the body of
..... and that –

(a) the finding was as follows –

.....

(b) the cause of death was –

.....

(c) the cause of death will be ascertained –

.....

medical evidence was given by –

.....

I am satisfied from the evidence that the cause of death was
..... (or that the cause of death will be
ascertained) and that no circumstance exists which would render necessary any
further examination of the remains or any analysis of any part of the body.

(Date)

.....

Viscount.

SCHEDULE 6³⁴

(Regulation 7(2))

AUTHORITY TO CREMATE

Whereas application has been made for the cremation of the remains of
(*name*)
(*address*)
(*occupation*).....

And whereas I have satisfied myself that all the requirements of the Cremation (Jersey) Regulations 1961, have been complied with, that the cause of death has been definitely ascertained and that there exists no reason for any further inquiry or examination:

I authorize the Superintendent of the Crematorium to cremate the said remains.
(*Date*).....

.....
Medical referee.

SCHEDULE 7³⁵

(Regulation 13)

REGISTER OF CREMATIONS

No.	Date of cremation	Name, residence and occupation of deceased	Age and Sex	Whether married, in civil partnership or single	Date of death	Name and address of person who applied for cremation	Names and addresses of persons signing certificates	How ashes were disposed of

ENDNOTES

Table of Legislation History

Legislation	Year and No	Commencement
Cremation (Jersey) Regulations 1961	R&O.4253	17 May 1961
Cremation (Amendment) (Jersey) Regulations 1963	R&O.4421	6 March 1963
Cremation (Amendment No. 2) (Jersey) Regulations 1967	R&O.4902	4 March 1967
Cremation (Amendment No. 3) (Jersey) Regulations 1971	R&O.5576	6 October 1971
Cremation (Amendment No. 4) (Jersey) Regulations 1972	R&O.5749	1 January 1973
Cremation (Amendment No. 5) (Jersey) Regulations 1975	R&O.6195	1 October 1975
Cremation (Amendment No. 6) (Jersey) Regulations 1976	R&O.6366	1 January 1977
Cremation (Amendment No. 7) (Jersey) Regulations 1977	R&O.6400	6 April 1977
Cremation (Amendment No. 8) (Jersey) Regulations 1978	R&O.6567	1 January 1979
Cremation (Amendment No. 9) (Jersey) Regulations 1979	R&O.6662	23 May 1979
Cremation (Amendment No.10) (Jersey) Regulations 1980	R&O.6822	1 July 1980
Cremation (Amendment No. 11) (Jersey) Regulations 1980	R&O.6873	1 January 1981
Cremation (Amendment No. 12) (Jersey) Regulations 1981	R&O.6999	1 January 1982
Cremation (Amendment No. 13) (Jersey) Regulations 1982	R&O.7103	1 January 1983
Cremation (Amendment No. 14) (Jersey) Regulations 1996	R&O.8967	5 September 1996
Rates (Jersey) Law 2005	L.33/2005	2 December 2005
States of Jersey (Amendments and Construction Provisions No. 5) (Jersey) Regulations 2005	R&O.45/2005	9 December 2005
Cremation (Amendment No. 15) (Jersey) Regulations 2011	R&O.73/2011	14 June 2011
Civil Partnership (Consequential Amendments) (Jersey) Regulations 2012	R&O.47/2012	2 April 2012
Marriage and Civil Status (Amendment No. 5) (Jersey) Law 2023	L.6/2023	24 March 2023

Legislation	Year and No	Commencement
Cremation (Jersey) Amendment Regulations 2026	R&O.49/2026	1 April 2026

Table of Renumbered Provisions

Original	Current
13A	14
14	spent, omitted from this revised edition; former Regulation 14 amended by R&O.5576 , R&O.6662 , R&O.6822
EIGHTH SCHEDULE	spent, omitted from this revised edition; former SCHEDULE inserted by R&O.4421; amended by R&O.5749 , R&O.6195 , R&O.6366 , R&O.6567 , R&O.6873 , R&O.6999 , R&O.7103

Table of Endnote References

¹	<i>These Regulations have been amended by the States of Jersey (Amendments and Construction Provisions No. 5) (Jersey) Regulations 2005. The amendments replace all references to a Committee of the States of Jersey with a reference to a Minister of the States of Jersey, and remove and add defined terms appropriately, consequentially upon the move from a committee system of government to a ministerial system of government amended by R&O.73/2011, L.6/2023</i>
² Regulation 1	<i>amended by R&O.49/2026</i>
³ Regulation 2	<i>amended by R&O.49/2026</i>
⁴ Regulation 2A	<i>inserted by R&O.73/2011</i>
⁵ Regulation 2A(2)	<i>amended by R&O.49/2026</i>
⁶ Regulation 3	<i>amended by R&O.49/2026</i>
⁷ Regulation 4(1)	<i>deleted by R&O.49/2026</i>
⁸ Regulation 4(2)	<i>amended by R&O.49/2026</i>
⁹ Regulation 4(3)	<i>amended by R&O.49/2026</i>
¹⁰ Regulation 4(4)	<i>amended by R&O.49/2026</i>
¹¹ Regulation 5(1)	<i>amended by R&O.73/2011, R&O.49/2026</i>
¹² Regulation 5(2)	<i>amended by R&O.73/2011, substituted by R&O.49/2026</i>
¹³ Regulation 5(2A)	<i>inserted by R&O.49/2026</i>
¹⁴ Regulation 5(3)	<i>amended by R&O.6400, L.33/2005, substituted by R&O.49/2026</i>
¹⁵ Regulation 5(4)	<i>inserted by R&O.49/2026</i>
¹⁶ Regulation 5(5)	<i>inserted by R&O.49/2026</i>
¹⁷ Regulation 5(6)	<i>inserted by R&O.49/2026</i>
¹⁸ Regulation 6	<i>amended by R&O.4902, R&O.8967, L.6/2023, editorial change, in sub-paragraph (b), “Inquest” deleted, “Inquests” inserted instead, amended by R&O.49/2026</i>
¹⁹ Regulation 7	<i>heading amended by R&O.73/2011</i>
²⁰ Regulation 7(1)	<i>amended by R&O.73/2011, R&O.49/2026</i>
²¹ Regulation 7(2)	<i>substituted by R&O.73/2011, R&O.49/2026</i>
²² Regulation 8	<i>substituted by R&O.73/2011, R&O.49/2026</i>
²³ Regulation 9	<i>amended by R&O.8967, R&O.73/2011, substituted by R&O.49/2026</i>
²⁴ Regulation 10	<i>amended by R&O.73/2011, L.6/2023, R&O.49/2026</i>
²⁵ Regulation 11(2)	<i>amended by R&O.73/2011, R&O.49/2026</i>
²⁶ Regulation 12(1)	<i>amended by R&O.49/2026</i>
²⁷ Regulation 12(2)	<i>substituted by R&O.45/2005, amended by R&O.49/2026</i>

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- ²⁸ *Regulation 13(1)* *amended by R&O.49/2026*
- ²⁹ *Regulation 13(2)* *substituted by R&O.49/2026*
- ³⁰ *Regulation 14* *inserted by R&O.6400, amended by R&O.49/2026*
- ³¹ *Schedule 1* *amended by R&O.47/2012, text substituted by R&O.49/2026*
- ³² *Schedule 4* *amended by R&O.8967*
- ³³ *Schedule 5* *substituted by R&O.8967*
- ³⁴ *Schedule 6* *amended by R&O.73/2011*
- ³⁵ *Schedule 7* *amended by R&O.47/2012*