

## Cemetery Application for Burial / Niche / Purchase of a Plot

All cemetery applications to be received with a minimum 1 weeks' notice (5 business days)

<b>Details of Applicant:</b>			
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Business <input type="checkbox"/> Other <input type="checkbox"/> If other, please specify:			
Surname:		Given Name/s:	
Address:			
Email:		Phone:	
Responsible person for council fees payable? Applicant <input type="checkbox"/> Funeral Director <input type="checkbox"/> Other <input type="checkbox"/>			
Is Applicant Next of Kin <input type="checkbox"/> Burial Rights Holder <input type="checkbox"/> Other <input type="checkbox"/> (Please specify)			
<b>*NOTE: for all coffin/casket burials within a plot, the funeral director must be listed as the debtor.</b>			
<b>Details of person to be interred:</b>			
Male <input type="checkbox"/> Female <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> If other, please specify:			
Surname:		Given Name/s:	
Marital Status:		Occupation:	
Date of Birth:		Date of Death:	Age:
Birthplace:		Place of Death:	
Cause of Death:		Religion:	
Last Place of Residence:			
<b>Interment Details:</b>			
Name of Cemetery:			
Funeral Director:			
Single Plot <input type="checkbox"/> Double Depth <input type="checkbox"/> Columbarium <input type="checkbox"/> Occupied Grave <input type="checkbox"/> Occupied Niche <input type="checkbox"/>			
Date of Funeral Service:		Time of Funeral:	am <input type="checkbox"/> pm <input type="checkbox"/>
Location: Graveside <input type="checkbox"/> Church <input type="checkbox"/>		Arrival time at Cemetery:	am <input type="checkbox"/> pm <input type="checkbox"/>
Shade/chairs requested? Yes <input type="checkbox"/> No <input type="checkbox"/>		# Chairs requested?	(Up to 20)
<b>*Note: additional fee applies for graveside set up (shade &amp; chairs) refer to fees and charges.</b>			
Standard <input type="checkbox"/>	Casket Oversize: L	mm	W mm H mm Ashes <input type="checkbox"/>
Current Interment (if applicable):			Date of Last Service:
<b>Plot details for existing reservation or purchased plot (if known):</b>			
Name of burial rights holder:			
Current burial rights holder deceased? Yes <input type="checkbox"/>		Section:	Row: Plot:
Single Plot <input type="checkbox"/> Double Depth <input type="checkbox"/> Columbarium <input type="checkbox"/> Occupied Grave <input type="checkbox"/> Occupied Niche <input type="checkbox"/>			
Names of Person/s already interred (if applicable):			
<b>*Reservations made before 1<sup>st</sup> July 2023</b>			
<b>Request for purchase of an additional plot or second interment at double depth:</b>			
Male <input type="checkbox"/> Female <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> If other, please specify:			
Surname:		Given Name/s:	
Address:			
Email:		Phone:	
Date of Birth:		Birthplace:	
Name of Cemetery:			
Single Plot <input type="checkbox"/> Double Depth <input type="checkbox"/> Columbarium <input type="checkbox"/> Occupied Grave <input type="checkbox"/> Occupied Niche <input type="checkbox"/>			
Last Interment (if applicable):		Date of Last Service:	
Special Requests/plot details:			
<b>Declaration</b>			
I, undersigned applicant declares:			
a) I have the legal right to authorise the application or where applicable, I have been given the authority to act on behalf of the person with aforementioned right;			
b) I understand and agree to the Councils Cemetery Management Guidelines;			
c) That I shall, at all times, keep indemnified the Central Highlands Regional Council in connection with any activity carried out under this application.			
Name:			Date:
Signature			