

## APPLICATION FOR RESERVATION OF A CEMETERY PLOT 2024-25

### Reservation Details

Date of Application \_\_\_\_\_ Cemetery \_\_\_\_\_

I understand capacity: lawn cemetery plot one burial and one inurned ashes, monumental plot two burials and two inurned ashes, granite cemetery plot two burials and two inurned ashes, remembrance garden two inurned ashes, niche wall one inurned ashes

I understand that memorials and adornments need to adhere to Council regulation

General Interment (\$555)     Parkes Lawn (\$2740)     Peak Hill Beam (\$770)     Stillborn Child (\$160)

Remembrance Garden A-H (\$455)     Remembrance J-M (\$1420)     Niche Wall (\$180)

Reserved by \_\_\_\_\_ Signature \_\_\_\_\_

### Personal Details of Reseree

Surname \_\_\_\_\_ Gender \_\_\_\_\_

Christian Names \_\_\_\_\_ Date of Birth \_\_\_\_\_

Also known as \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_ P/Code \_\_\_\_\_

Telephone \_\_\_\_\_

### Next of Kin or Executor (for correspondence)

Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_ P/Code \_\_\_\_\_

Telephone \_\_\_\_\_

**Note:** Please provide all the details required. Incomplete or illegible information may lead to delays.

### Payment Plan for Lawn Cemetery (if required)

Deposit Paid (\$740) \_\_\_\_\_ Date \_\_\_\_\_

I hereby agree to pay \$\_\_\_\_\_ per fortnight off my Cemetery Account. This account will be finalised within 12 months of the date of the original invoice. I fully understand that if I fail to make payment as per the agreement, I forfeit all rights pertaining to this plot, and will make full and final payment within 21 days or the plot will be released.

Signature \_\_\_\_\_ Witness \_\_\_\_\_

### OFFICE USE ONLY

Cemetery \_\_\_\_\_ Row \_\_\_\_\_

Section/Niche \_\_\_\_\_ Plot \_\_\_\_\_

Full Amount \_\_\_\_\_ Receipt No \_\_\_\_\_ Receipt Date \_\_\_\_\_

OR Deposit Amount \_\_\_\_\_ Receipt No \_\_\_\_\_ Receipt Date \_\_\_\_\_