

Application for Interment of Ashes into Grave

Applicants Details			
Name of Applicant		Signature	
Postal Address			
Email Address		Phone Number	
Date of Death		Relationship to Deceased	
Name of Deceased			
Does the family wish to be present when ashes are interred? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Location of Ashes.....			
Location of Grave, Section/Row & Plot Number.....			
<u>Payment in full must be made with this Application</u>			
Location of Grave			
<input type="checkbox"/> Interment into Lawn Cemetery with replacement plaque <i>See over for plaque application</i>	<input type="checkbox"/> Clarence Lawn <i>GL ClarLawnCemInten</i> <input type="checkbox"/> Maclean Lawn <i>GL MacLawnCemInter</i>	Receipt No	Fee
<input type="checkbox"/> Interment of ashes into grave (cemetaries other than Lawn Cemetaries – no plaque)	<input type="checkbox"/> Old Grafton (Villa St) <i>GL OldGfnCemIntermt</i> <input type="checkbox"/> Sth Grafton (Bent St) <i>GL SthGfnCemIntermt</i> Name of Other Cemetery <i>GL OthCemInterment</i>	Receipt No	Fee

Office Use Only	
<u>Customer Service Officer</u>	
Application received and all boxes completed	<input type="checkbox"/> Yes Date.....
Fee paid	<input type="checkbox"/> Yes Date.....
<u>Cemetery Administration Officer</u>	
Complete Mock up	<input type="checkbox"/> Yes Date.....
Complete Council Order	<input type="checkbox"/> Yes Date.....
Plaque Company Date.....	Order No.....
Plaque Received from Supplier	<input type="checkbox"/> Yes Date.....
Check Plaque Details	<input type="checkbox"/> Yes Date.....
Notify Cemetery Maintenance Officer – ready for placement	<input type="checkbox"/> Yes Date.....
Applicant Notified	<input type="checkbox"/> Yes Date.....

Sample Plaque

Double plaque

Emblem/cross

Line 1	40 Letters/spaces
Line 2	20 Letters/spaces
Line 3	40 Letters/spaces
Line 4	20 Letters/spaces
Line 4	40 Letters/spaces
Line 5	40 Letters/spaces
Line 6	40 Letters/spaces
Line 7	40 Letters/spaces
Line 8	40 Letters/spaces

EMBLEM/CROSS
IN LOVING MEMORY
ERIC ALBERT WATLEFON
 1-10-1900 - 1-10-1980
ELIZABETH ANN WATLEFON
 10-1-1901 10-1-1981
BELOVED PARENTS OF NESSIE & KYLIE
LOVED NAN & POP OF PETER & SHANE
TOGETHER AGAIN

Details of Plaque – Clarence/Maclean Lawn Cemeteries Only

(Refer To Sample Plaque Above)

Edging Bevelled or Raised Polished (Please circle one)

PLEASE USE BLOCK LETTERS

EMBLEM TYPE/NO.....or CATHOLIC/PLAIN CROSS (please circle one)

1.....**IN LOVING MEMORY OF**

2.....

3.....

4.....

5.....

6.....

7.....

8.....

Privacy Advice

The personal information that Council has collected or is collecting from you is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 (PPIPA). Council will only use this information in accordance with the PPIPA.

The supply of this information by you is voluntary. However, if you cannot provide or do not wish to provide the information sought, the Council may be limited in dealing with your application/request. Council requires this personal information from you in order to process your application.

You may make application for access or amendment to your personal information held by Council. Council will consider any such application in accordance with the PPIPA.

Council is to be regarded as the agency that holds the information.