

About this form

Complete this form to provide Council with information in relation to the placement of a memorial plaque at one of Council's Cemetery sites. On receipt of this form, a Cemeteries Officer will contact the applicant to discuss further.

Please note that this form **does not** order a plaque (see notes).

Applicant details

Applicant surname Given names

Postal address

Phone Mobile Email

Your relationship to the deceased Executor Next of kin Other

Other Details

Burial/Placement details

Type of placement Burial Ashes/Wall

Remove and replace existing plaque Yes No

Is this for memorial purposes only Yes No

Ashes to be placed Yes No *If Yes, please complete Ashes Interment Form*

Is there a Certificate of perpetual interment right (formerly known as an exclusive reservation)? Yes No

Cemetery

General Lawn Gardens Columbarium Walls

Section Row Garden/Wall Lot/Niche No.

Details of the deceased (interment right owner or intended for)

1. Name of the deceased Male Female

Last Address of the deceased

Date of birth Date of death Religious or Cultural belief

Date of burial/cremation Place of death Age

Occupation

2. Name of the deceased Male Female

Last Address of the deceased

Date of birth Date of death Religious or Cultural belief

Date of burial/cremation Place of death Age

Occupation

