

SECTION A - INTERMENT DETAILS

<input type="checkbox"/>	Pre-Need (Reservation)	\$ 841.09	Wall:	
<input type="checkbox"/>	At-Need (Immediate use)	\$1,563.31	Niche No:	
<input type="checkbox"/>	Open Reserved Niche	\$ 722.22	(includes purchase of plaque and surround)	
<input type="checkbox"/>	Special requirements	\$ 189.72 / hour	i.e. Removal or moving of Ashes (complete Section K)	

SECTION B - DETAILS ABOUT DECEASED (NOT REQUIRED FOR PRE-NEED)

Surname:		First Name:	
Last Residential Address:			
Personal Details:		Date of birth:	
Date Deceased:	Burial Date:	Age:	

SECTION C - APPLICANT/S (HOLDER/S OR INTENDED HOLDER/S OF INTERMENT RIGHT)

HOLDER 1			
Name:			
Address:			
Phone:	Relationship to deceased:	Reservation for self	<input type="checkbox"/>
HOLDER 2			
Name:			
Address:			
Phone:	Relationship to deceased:	Reservation for self	<input type="checkbox"/>

SECTION D - PROOF OF IDENTITY - CHECK TWO FORMS OF ID

Passport	<input type="checkbox"/>	Drivers Licence	<input type="checkbox"/>
Birth Certificate	<input type="checkbox"/>	Credit Card	<input type="checkbox"/>
EFTPOS Card	<input type="checkbox"/>	Medicare Card	<input type="checkbox"/>
Pension Card	<input type="checkbox"/>	Healthcare Card	<input type="checkbox"/>

I _____ of _____

(Name of Consultant)

(Organisation)

declare that I have sighted two of the above original forms of identification, provided by below Applicant/Interment Right Holder.

(Signature of Consultant)

(Date)

SECTION E - APPLICANT/S (HOLDER/S OR INTENDED HOLDER/S OF INTERMENT RIGHT)

Identify the name/identity of the person/s whose remains may be interred:

Specify a person who may nominate the person/s whose remains may be interred:

Specify the type of person, in relation to the Right Holder/s, who may nominate the person/s whose remains may be interred. E.g. family, children, friends, partners etc.:

SECTION F – NEXT OF KIN

Name:

Address:

Phone:

Relationship to deceased:

SECTION G – FUNERAL DIRECTOR (NOT REQUIRED FOR PRE-NEED)

Name:

Phone:

Postal Address:

NOTE:

Upon payment of the current fee to purchase a niche in Maitland City Council's Columbarium, an Interment Right will be issued to the person nominated as the Holder. This Interment Right gives that person, or any other person they nominate, the right to be interred in that niche.

Should the deceased be the Holder, then the Interment Right becomes part of his or her estate, to be administered by his or her Executor. If there is no Executor, then the Next of Kin who is the "major beneficiary" may authorise the opening of the grave for the interment of the deceased. Only the Holder of the Interment Right can authorise an interment into the niche.

The Interment Right can be transferred to another person while ever the niche is vacant. This is not legally complete until any transfer is registered in Maitland City Council's Cemetery Register. It is necessary to supply relevant information such as a will, statutory declaration or evidence of identity to transfer the ownership of a niche.

SECTION H – SIGNATURE/S

I declare the information I have supplied in this application is true and correct and I have legal authority to make this application.

Signature:

Date:

Signature:

Date:

PRIVACY AND PERSONAL INFORMATION PROTECTION NOTICE: The collection of this information is a Statutory requirement under the Cemeteries & Crematoria Act 2013 & Public Health Regulation 2012. This document will form part of a public record that Council may use and or make available in accordance with the Privacy and Personal Information Protection Act 1998 and the Government Information (Public Access) Act 2009. A consequence of non-provision may result in burial plot not being allocated. Council will take all reasonable steps to protect the personal information it holds from misuse, unauthorised access and modification. Council will retain your personal information for a period that is in accordance with the State Records General Authority 39 (GA39)

OFFICE USE ONLY (Payment Codes – Reservations GL 30401 BCI / Interment GL 30400 BCI / CCNSW Interment Service Levy 1873.3177 BCI)

Amount Paid:

\$

Date:

Receipt No:

SECTION I – ASHES TO BE COLLECTED FROM FUNERAL DIRECTOR (IF APPLICABLE)(NOT REQUIRED FOR PRE-NEED)

Funeral Director Name:

Phone:

Special Instructions

Would the applicant like to be contacted before interment?

Yes

No

Would the applicant like to be present at interment?

Yes

No

SECTION J – INSCRIPTION DETAILS FOR PLAQUE (MAX 6 LINES)(NOT REQUIRED FOR PRE-NEED)



SECTION K - SPECIAL REQUIREMENTS (NOT REQUIRED FOR PRE-NEED)

