#

Memorial, Celebration and Commemorative Items Application Form

Before submitting this form, please ensure that you have completed the following:

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| --- | --- | --- |
| Guidelines | YES (PLEASE TICK) | NO (PLEASE TICK) |
| I/my organisation understand the policy and associated conditions for the proposal as discussed with Maitland City Council | □ | □ |
| I have attached or included the memorial, celebration and commemorative item specifications including location and material. | □ | □ |

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| aPPLICANT DETAILS |
| Name/organisation |  |
| Address |  |
| Email address |  |
| Contact phone number |  |
| Applicant relationship |  |

|  |  |
| --- | --- |
| request type | Tick |
| Memorial plaque | □ |
| Plaque as part of a ‘Celebration Wall’ | □ |
| Bench seat | □ |
| A sign of recognition | □ |
| Other (please specify) | □ |

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| Proposed location for item |
| Option A: |
| Option B: |

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| Proposed inscription (if applicable) |
| *Final wording for the item will be subject to council approval.*Memorial, Celebration or Commemorative Item may consist of the following options for wording:**‘In loving Memory of’** or **‘In Memory of’, Person’s name and date, ‘In recognition of’, ‘In celebration of’****Or an acknowledgment of contribution with person’s name and date** |  |

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| Specifications for plaque size (if applicable) |
| Size of plaque (maximum 10cm length, 6cm height, <2mm thick) |  |
| Colour |  |
| Material |  |

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| --- |
| RELEVANT INFORMATION (IF NOT A PLAQUE) |
| E.g. Proposed size, specifications, materials etc |

|  |  |
| --- | --- |
| REASON RELATING TO REQUEST | Tick |
| An individual or Association strongly linked to Maitland City Council and its history | □ |
| A significant anniversary of an event unique to the history and development of the locality | □ |
| A deceased or living individual (please specify): | □ |

I, the applicant, am 18 years of age or over and understand and agree to the conditions in relation to the proposed installation of a Memorial, Celebration and Commemorative Items on public land or Council owned/managed buildings, as advised by Maitland City Council.

I agree to indemnify Council from and against all claims arising from the applicant’s legal liability as a result of this application.

Print Name Signature Date

# The personal information you have provided is collected for the purpose of processing your hire application. Maitland City Council is committed to the principles of the *Privacy and Personal Information Protection Act 1998* (NSW) and the personal information you have provided will be stored, accessed, disclosed, used, retained and disposed of by Maitland City Council in accordance with its Privacy Management Plan.

|  |  |  |
| --- | --- | --- |
| OFFICE USE ONLY | YES (PLEASE TICK) | NO (PLEASE TICK) |
| Review of Application undertaken by Council | □ | □ |
| Consultation with all applicable Officers within Council | □ | □ |
| Approval Granted/Declined | □ | □ |
| Fees and Charges Applicable | □ | □ |

## Contact details

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