

Application for Interment Authorisation

Please complete in block letters.

Details of Deceased

Title Given Names

Surname

Sex: Male Female

Date of Birth Date of Death Age

Last Known Permanent Address:

Suburb/Town State Post Code

Religion (if any)

Did the deceased have a spouse or domestic partner at the time of his or her death? Yes No

OFFICE USE ONLY

Ref No.

Check No.

Document Check

Coroner/Doc. Cert./Other

Details of Interment

Name of cemetery

Type of place of interment (eg. grave, vault, crypt)

Location in cemetery of place of interment (eg. grave number, row and section)

How many interments should the place of interment be prepared to accommodate? (if applicable) Note this applies in the case of first interments only

1 2 3 Other (give details)

Dimensions of coffin, receptacle or container (if any): Length (cm) Width (cm) Depth (cm)

Material of which coffin, receptacle or container is constructed (eg wood, metal)

Applicant for Interment Authorisation

Title Given Names Surname

Address

Suburb/Town State Post Code

Telephone: Home Work Mobile

Email

Relationship to the deceased

Consent of Holder of Right of Interment

Are you the holder of the right of interment for the place of interment where the remains will be interred? Yes No

If No, provide the details of the holder(s) of the right of interment, and answer the questions below.

Title Given Names Surname

Address

Suburb/Town State Post Code

Telephone: Home Work Mobile

Email

Has the holder of the right of interment been informed of this application? Yes No

If No, give reasons why the holder of the right of interment has not been informed of this application:

If Yes, does the holder of the right of interment consent to this application? Yes No

Signature of holder of right of interment

Date

Other Matters

Details of funeral director or the person who is otherwise arranging for the disposal of the human remains:

*Company name

Title

Given Names

Surname

Address

Suburb/Town

State

Post Code

Telephone

Fax

Email

* Delete if not applicable

COMPANY STAMP

Matters relating to the Interment

Service type: Service both ends Meet at cemetery No attendance

Location

Date

Time

Special service requirements

Other remarks

Details of the type of place of interment: New Pre-purchased/pre-need Reopen

Signature of Applicant

Date

PRIVACY STATEMENT

Any personal information you provide in your application will be treated in accordance with the principles set out in the *Information Privacy Act 2000*. You are able to request access to the information that we hold about you, and to request its correction if necessary.

The information you provide to us is required to help us process your application and notify you of matters concerning it. We also need the information to perform our functions, comply with our obligations and exercise our rights under the *Cemeteries and Crematoria Act 2003*. Except for information you are required under that legislation to submit with your application, you are not obliged to provide any personal information. However, should you choose not to provide this information, we may not be able to process your application or provide the services to you for which the information is required.

We may also want to use and disclose the information for the purpose of providing you with information about memorialisation goods and services.

If you do not want us to use the information for such purposes please tell us:

I do not wish to receive information about memorialisation goods and services

Under the *Cemeteries and Crematoria Act 2003*, we also are required to keep records containing certain information regarding interments, cremations and rights of interment. Members of the public are entitled to have access to those records.