

CEMETERY APPLICATION FOR BURIAL WARRANT - GRAVE

Date of Application: _____

Name of Applicant: _____

Name of Deceased: _____

Age of Deceased: _____

Late Residence: _____

Late Occupation: _____

Next of Kin/Contact Details: _____

Date of Death: _____ Is the deceased ex services? _____

Service number: _____ Rank: _____ Unit: _____

Number of Lot or Grave on Plan:

Block: _____ Section: _____ Lot: _____

Depth & Size of Grave Required: Length - _____ Width - _____ Depth - _____

Shape of Casket:

Oblong - Tapered - Other - If 'Other' (exact dimensions required _____)

If body not in a casket, a piece of plywood, size fit for purpose, needs to be supplied to place over body.

Are Shovels Required? Yes - No - **Do Family intend to back fill?** Yes - No -

Name of Holder of Grant of Exclusive Right of Burial if allotment previously purchased:

Name to be inserted in Grant of Exclusive Right of Burial of Allotment now to be purchased:

Name of Officiating Minister: _____

Religious Denomination: _____

Name of Funeral Directors/Stone Mason: _____

Date & Time Appointed for Burial: _____

Fees Paid: \$ _____ Receipt No. _____

Invoiced to: _____

Signature of Applicant: _____

Office use Only			
Enter details in outlook Calendar	<input type="checkbox"/>	Check cemetery Reservations list	<input type="checkbox"/>
Contact on-duty Sexton	<input type="checkbox"/>	Complete Warrant book	<input type="checkbox"/>
Advise Custodian	<input type="checkbox"/>	Enter Plot & Map details	<input type="checkbox"/>
Use of Council Facility?	<input type="checkbox"/>	Enter details in the Alpha list	<input type="checkbox"/>
Delete available plot	<input type="checkbox"/>	Invoice	<input type="checkbox"/>
Add as Origen Contact	<input type="checkbox"/>	Load details in Origen	<input type="checkbox"/>