Application for approval to intercremated human remains

(Form B)

			OFFICE USE ONLY	
Details of d	arassad		Ref no:	
			Check no:	
Title:	Given names:		Official fig.	
Surname:				
Sex: Male	Female	Date of birth: / /	Date of death: / /	
<u>.</u>	rmanent address:			
Suburb/town:		State:	Post code:	
Religion, if any	(please note this fie	ld is optional):		
Details of ir	nterment			
Name of ceme	-	he well wounder grove).		
Type of place of interment (e.g. niche wall, garden, grave):				
Location in cer	netery of the place o	f interment (e.g. number, row and sec	xion):	
Term of right o	f interment for the pla	ace of interment: Perpetual	25 years	
If term of the right of interment is 25 years, provide the date the right of interment was granted: / /				
Title:				
Address:				
Suburb/town:		State:	Post code:	
Telephone	Home:	Work:	Mobile:	
Email:				
	holder of right of light of the right of the right of the right of the No		ere the cremated remains will be interred?	
If no, provide t	he details of the hold	der of the right of interment below and	answer the questions on the next page.	
			changes to these contact details as the nterment about the cremated remains in	
Title:	Given names:	Surna	me:	
Address:				
Suburb/town:		State:	Post code:	
Telephone	Home:	Work:	Mobile:	
Email:				

Has the holder of the right of interment been informed of this application?			
Does the holder of the right of interment consent to this application?	s 🗌 No		
Signature of holder of right of interment:	Date: / /		
Other matters	Company stamp		
Details of the funeral director or the person otherwise arranging for the interment of the cremated remains:			
Company name (if applicable):			
Title: Given names:			
Surname:			
Address:			
Suburb/town: State:	Post code:		
Telephone: Fax:			
Email:			
Matters relating to interment Service type: service both ends meet at cemetery no attendant Location:	ice		
Date: / / Time:			
Special service requirements:			
Other remarks:			
Details of the type of place of interment: new pre-purchased/pre-n	need reopen		
Details of the type of place of intermedic.	leed leopen		
Signature of applicant:	Date: / /		
Warning			
Under section 141 of the <i>Cemeteries and Crematoria Act 2003</i> it is an offence cremated human remains in a public cemetery unless the cemetery trust has by a fine of up to 20 penalty units.			
Privacy statement ☐ If you wish to receive information about memorialisation goods and service. Any personal information you provide in your application will be treated in accordance with the Protection Act 2014. You may request access to the information we hold about you and you me The information you provide is required to enable us to process your application and inform you information to perform our functions, comply with our obligations and exercise our rights under Except for the information you are required to submit under that legislation, you are not obliged However, should you choose not to provide this information, we may not be able to process you the information is required. Under the Cemeteries and Crematoria Act 2003, we are also required to keep records contain cremations and rights of interment. Members of the public are entitled to access those records	e principles set out in the <i>Privacy and Data</i> nay request its correction if necessary. Ou of matters concerning it. We also need the r the <i>Cemeteries and Crematoria Act 2003</i> . d to provide any personal information. Our application or provide the services for which ning certain information regarding interments,		

