

Application for ASHES placement into a Grave, Niche or Lawn Site 2023/2024

****Please complete all sections and sign and date the form****

Date site is required :			
Please TICK which CEMETERY:		Please TICK which SECTION:	
Martyn Street #168	<input type="checkbox"/>	Lawn Plaque Section	<input type="checkbox"/>
Forest View #169	<input type="checkbox"/>	Lawn Headstone Section	<input type="checkbox"/>
Gordonvale #171	<input type="checkbox"/>	Mausoleum Section	<input type="checkbox"/>
Nelson Rd Babinda #172	<input type="checkbox"/>	Monumental Section	<input type="checkbox"/>
Babinda #172	<input type="checkbox"/>	Vault Section	<input type="checkbox"/>
		Columbarium Wall Niche	<input type="checkbox"/>
		Inurnment:	First <input type="checkbox"/> Second <input type="checkbox"/>
		Prior Reservation:	Yes <input type="checkbox"/> No <input type="checkbox"/>
		Row/Site No:	

Section A – Details of the Deceased

Family Name:		Given Name/s:	
Male <input type="checkbox"/>	Female <input type="checkbox"/>	Maiden Name:	Also known as:
Address:			
Suburb/City:		State:	Postcode:
Date of Birth:	Place of Birth:	Date of Death:	Age:
Mother's Name: <i>(include Maiden Name)</i>		Father's Name:	
Spouse's Name:		Previous Occupation:	Denomination:
Cause of Death:		Place of Death:	Issuing Doctor:

Section B – Burial Right Holder

Family Name:		Given Name/s:	
Relationship to Deceased:			Date of Birth:
Address:			
Suburb/City:		State:	Postcode:
Phone:		Email:	

Section C – Ash Placement Details

Do you require a service to be held or family to attend:		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Time: _____ : _____	<input type="checkbox"/> am	<input type="checkbox"/> pm
Clergyman/Celebrant officiating			Arrival Time at Cemetery : _____ : _____			
Service details:		<input type="checkbox"/> Graveside	<input type="checkbox"/> Church			
Measurements of Ashes Receptacle*		L _____ mm x W _____ mm x D _____ mm				
<i>*Measurements must be accurate and include handles or other protrusions.</i>						
Confirmed with Cemetery Ganger:		<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Reserve Plot/s Alongside: <i>If yes, complete Application for Reservation</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Plot No:	Name:	

I / We make application under <i>Cairns Regional Council Local Law No.1 (Administration) 2016</i> to obtain a permit to conduct the activity outlined in this form.	
Applicant	
Signature	Date

OFFICE USE ONLY					
Amount Rec'd:	Receipt No:	DM#			
Date:	Officer:	Authority <input type="checkbox"/>	Approval to F/Dir <input type="checkbox"/>	Copy to Cem <input type="checkbox"/>	Tracking <input type="checkbox"/>

Order Form (Columbarium Walls Only) Bronze Memorial Niche Plate

Name of Deceased:

Important: Please check the niche dimensions to ensure that the niche will accommodate the size of the ashes urn

Site Location	Size of Niche	Additional information <i>(for manufacture)</i>
Martyn Street		
Site: CW4	<input type="checkbox"/> Single Niche (230W x 185H)	Raised edges & No lugs
Site: CW1, CW2, CW3	<input type="checkbox"/> Single Niche (136W x 102H)	Bevelled edges & brackets
	<input type="checkbox"/> Double Niche (152W x 196H)	Bevelled edges & brackets
	<input type="checkbox"/> or Second Plate for Double Niche (136Wx85H)	Bevelled edges & No lugs - <i>Stippled / Not Stippled</i>
Gordonvale		
Site: CW2, CW3	<input type="checkbox"/> Single Niche (230W x 185H)	Raised edges & No lugs
Site: CW1	<input type="checkbox"/> Single Niche (136W x 102H)	Raised edges & No lugs
	<input type="checkbox"/> Double Niche (152W x 196H)	Raised edges & No lugs
	<input type="checkbox"/> or Second Plate for Double Niche (136Wx85H)	Raised edges & No lugs - <i>Stippled / Not Stippled</i>
Nelson Road, Babinda		
Site: CW1	<input type="checkbox"/> Single Niche (230W x 185H)	Raised edges & No lugs
Site: CW3, CW4	<i>*Granite covers already on wall. Applicant to contact monumental mason for engraving at their expense*</i>	
Babinda		
Site: CW2	<input type="checkbox"/> Single Niche (150W x 110H)	Raised edges & brackets
	<input type="checkbox"/> Double Niche (152W x 196H)	Raised edges & brackets
	<input type="checkbox"/> or Second Plate for Double Niche (136Wx85H)	Raised edges & No lugs - <i>Stippled / Not Stippled</i>
Forest View		
Site: CW1	<input type="checkbox"/> Single Niche (230W x 185H)	Raised edges & No lugs
Site: CW2, CW 3	<i>*Granite covers already on wall. Applicant to contact monumental mason for engraving at their expense*</i>	

Emblems

				<input type="checkbox"/> Other (Please specify)	<input type="checkbox"/> None
Latin Cross <input type="checkbox"/>	Celtic Cross <input type="checkbox"/>	Star of David <input type="checkbox"/>	Masonic <input type="checkbox"/>	Other (Please specify) <input type="checkbox"/>	None <input type="checkbox"/>

Australian Services Emblems

<input type="checkbox"/> AIF	<input type="checkbox"/> RAN	<input type="checkbox"/> RAAF
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Permission must be obtained from Australian War Graves Commission, PO Box 21, Woden ACT 2606

Vase Yes No

Inscription *Lines are to be started in BOX 1 - They will be centered on the plate when manufacturing. Please leave a space between words*

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Line 1																								
Line 2																								
Line 3																								
Line 4																								
Line 5																								
Line 6																								

I verify the above inscription to be correct

Name:	Relationship to deceased:
Address:	
Email:	Mobile / Phone No:
Applicant Name:	Signature: