

## Application for Burial or Ashes Right 2023/2024

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

<b>Cemetery:</b>		<b>Row / Plot Number:</b>	
<b>Please TICK which CEMETERY:</b>		<b>Please TICK which SECTION:</b>	
Martyn Street #168 <input type="checkbox"/>	Nelson Rd Babinda #172 <input type="checkbox"/>	Lawn Plaque Section <input type="checkbox"/>	Mausoleum Section^ <input type="checkbox"/>
Forest View* #169 <input type="checkbox"/>	Babinda #172 <input type="checkbox"/>	Lawn Headstone Section <input type="checkbox"/>	Monument/Vault Section <input type="checkbox"/>
Gordonvale #171 <input type="checkbox"/>		Columbarium Wall Niche <input type="checkbox"/>	Lawn Section for ashes <input type="checkbox"/>

\* Forest View cemetery does not have a headstone/monumental section

### Section A – Burial Right

#### Details of Burial Right Holder\*

\*The 'Burial Right Holder' is the person who has the right to be buried or placed in the specified site or authorise the burial or placement of others.

NB. The Burial Right Holders details below, including name and contact information, will be disclosed in circumstances where a person is seeking to apply to Council to make alterations to the burial site, which can include transfer/surrender of the site, burial application for the burial and/or application for the installation of a memorial on the site.

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

### Section B – Secondary Contact/Next of Kin\*

This person has no claim over the Burial Rights - but may assist Council to contact the Burial Right Holder if address or other details have changed in the future

Family Name:		Given Name/s:	
Relationship to Burial Right Holder:		Date of Birth:	
Address:			
Suburb/City:	State:	Postcode:	
Postal Address:			
Suburb/City:	State:	Postcode:	
Email:		Phone:	

### Section C – Burial Right Holder Declaration

I declare that the information I have provided is true and correct.	
I am aware that it is an offence to knowingly provide false or misleading information.	
I will notify council of any changes of any changes to my contact details.	
<input type="checkbox"/> I have read and understood the above declaration.	
Burial Right Holder Name:	
Signature:	Date:

### Section D – Applicable Fee

Adult Grave Site	\$995.00	<input type="checkbox"/>	Mausoleums*	<b>New</b> \$12,369.00	<input type="checkbox"/>	<b>Old</b> \$9,445.00	<input type="checkbox"/>
Lawn Site (Ashes Only)	\$257.00	<input type="checkbox"/>	Columbarium Wall Niche*	<b>New</b> \$180.00	<input type="checkbox"/>	<b>Old</b> \$89.00	<input type="checkbox"/>
Granite Wall Niche: Single	\$359.00	<input type="checkbox"/>	<small>*Check with Cemetery Admin for clarification of New &amp; Old Sites            ^ For Mausoleum and Above Ground Vaults – all bodies to be embalmed (Embalming Certificate to be provided prior to burial) and all bodies to be enclosed inside the coffin in a hermetically sealed liner of either plastic or metal material. Additional fee applicable for platform / lifting device if 3rd level Mausoleum site.</small>				

OFFICE USE ONLY					
Amount Rec'd:	Receipt:	DM#			
Date:	Officer:	Authority <input type="checkbox"/>	Approval to F/Dir <input type="checkbox"/>	Copy to Cem <input type="checkbox"/>	Tracking <input type="checkbox"/>

Cairns Regional Council – Privacy Statement: Your personal information has been collected for the purpose of assessing your Application for Approval. The collection of your information is authorised under the Local Government Act 2009. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the Information Privacy Act 2009 and will be accessed by people who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission, or the disclosure is required by law.