

Application for Order for Burial Burial or Ash Placement

Central
Coast
Council

Cemeteries

Office Use ONLY

Licence Number (Burial Licence)	CEM/	Plot Section:		Niche grove/side:	
Cemetery:		Plot Row:		Niche row (wall):	
Fee Paid:	\$	Plot Number:		Niche Number:	
Receipt Number:		Date:			

PLEASE PRINT IN BLOCK LETTERS

Full Name of Deceased:

Last Address:

Sex: Age: Date of Birth: Date of Death:

Second (or subsequent) Interment:
(Re-opening) Ashes: ☐ Coffin: ☐

Name of the previous Interment(s):

Date of Previous Interment: Is there a cover to be removed?

Name of Applicant: Telephone:

Address:

State: Postcode:

Burial Licence/Holder (if same as above leave blank)

Name: Telephone:

Address:

State: Postcode:

CONDITIONS

- For coffin burials, a copy of the Death Certificate must accompany this application including notification of a prescribed infectious disease.
- This form must be lodged with the Cemetery Authority at least 24 hours prior to the time of interment.
- Confirmation of the plot and Burial Licence/Holder details must be made with Council prior to a burial date being arranged.
- Proof of Burial Licence ownership must accompany this application; if not available, a Statutory Declaration may be acceptable.
- Should the Deceased be the Holder, then the Burial Licence becomes part of his or her Estate to be administered by the Executor. If there is no Executor, then the Next of Kin who is the "major beneficiary" may authorise the opening of the grave for the interment of the deceased.
- The Burial Licence/Holder is the legal personal representative of the Deceased. The Holder remains the legal representative until the Burial Licence is transferred to another recipient and registered in the Cemetery Register.
- It is the responsibility of the Funeral Director to engage the services of a pre-qualified gravedigger.
- To ensure the lawn section of the cemetery is maintained to a high standard, no ornaments, crosses, statues, icons, vases or other items may be permanently or temporarily placed onto the lawn. The planting of any flowers, shrubs, grass or trees at the grave site or anywhere else within the lawn cemetery is not permitted.

Cemeteries Bereavement Officer **P** (02)4350 5108 **F** (02) 4350 1520 **E** cemeteries@wyong.nsw.gov.au

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E ask@centralcoast.nsw.gov.au **W** www.centralcoast.nsw.gov.au **ABN** 43 149 644 003

I certify I am the (state relationship) and Burial Licence Holder of the deceased and hereby consent to the opening of the above grave and interment of the deceased in said grave.

I have read and understood the requirements of Central Coast Council Cemetery Procedures and agree to abide by the rules and restrictions.

Signed:

(Applicant)

Date:

Interment Details (To be completed by Funeral Director)

Funeral Director:

Arranger:

Address:

Telephone:

Fax:

Date of Interment:

Time of Interment:

Grave Digger:

Signature of Funeral Director:

Date: