

Application For Interment – Bingara Cemetery

Form to be furnished by the Funeral Director and returned to Gwydir Shire Council together with the fees payable

Applicant Details							
Applicants Name							
Address							
Telephone			Mobile				
Email							
Signature			Date				
Deceased Details							
5 HAL (5)							
Full Name of Deceased							
	DOB		Age		Sex	M	F
Late Address of Deceased							
Date of Death							
Interment Details							
Date of Funeral				Time			
Graveside Service	Y N			Church Service		Υ	N
Shade Shelter	Y N						
Section		Row		Grave/Niche No			
Size of Grave Deceased	Х			Is extra depth req	Juired	Υ	N
Are there additional Plot/s to be reserved Y N Burial Right Number							
Name in which Plot/s are to be reserved							



Application For Interment – Bingara Cemetery

Fees Payable						
Plots Interment Extra Depth Columbarium Shade Shelter Total	\$ \$ \$ \$ \$ \$ \$ \$	Next of Kin Details Name Address				
	۶					
OFFICE USE ONLY						
Receipt Number		Date Paid				
Invoiced Authority Cemetery Register						
Signature Issuing Officer						