

Application For Interment – Warialda Cemetery

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

Applicant Details

Applicants Name	<input type="text"/>		
Address	<input type="text"/>		
Telephone	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		
Signature	<input type="text"/>	Date	<input type="text"/>

Deceased Details

Full Name of Deceased	<input type="text"/>						
	DOB	<input type="text"/>	Age	<input type="text"/>	Sex	M	F
Late Address of Deceased	<input type="text"/>						
Date of Death	<input type="text"/>						

Interment Details

Date of Funeral	<input type="text"/>	Time	<input type="text"/>		
Graveside Service	Y	N	Church Service	Y	N
Shade Shelter	Y	N			
Section	<input type="text"/>	Row	<input type="text"/>	Grave/Niche No	<input type="text"/>
Size of Grave Deceased	<input type="text" value="X"/>		Is extra depth required	Y	N
Are there additional Plot/s to be reserved	Y	N	Burial Right Number	<input type="text"/>	
Name in which Plot/s are to be reserved	<input type="text"/>				

Application For Interment – Warialda Cemetery

Fees Payable

Plots	\$
Interment	\$
Extra Depth	\$
Columbarium	\$
Shade Shelter	\$
Total	\$

Next of Kin Details

Name

Address

OFFICE USE ONLY

Receipt Number

Date Paid

Invoiced

Authority

Cemetery Register

Signature Issuing Officer