



## **Interment of Ashes Application Form**

Cemeteries Act 1986, Cemeteries Local Law 2022

INTERMENT LOCATION								
☐ Dardanup Cemetery		Ferguson Cemetery						
Rose Garden		□ Niche Wall	Niche Wall		☐ Burial Plot			
Plot Number:		•						
PERSONAL DETAILS OF THE DECEASED								
Full Name:								
Last Place of Residence:								
Date of Birth:				Date of D	Death:			
Place of Death:								
Occupation:				Gender:				
Funeral Director:				Celebran	t:			
Place of Cremation:					•			
Date of Cremation:					Cremation te Provided:	Yes / No		
Special Instructions:								
APPLICANT DETAILS								
Full Name:								
Address:								
Email Address:								
Contact Number:								
Relationship to the Deceased:								



DECLARATION DETAILS						
I hereby certify that I am the applicant for this interment and have the authority for the use of the grave:						
$\square$ I am the person registered as the holder of the current Grant of Right of Burial (Grantee), or						
☐ I am the administrator or executor of the deceased Grant Holder, or						
in the case of a new grave, I am the person to be registered as the Holder of the Grant of Right of Burial (Grantee), state that all the information supplied is true and correct and agree to the conditions under which the Right of Burial is issued						
Signature:		Date:				

OFFICE USE ONLY							
GL CODE:	1027003						
FEE PAYABLE							
SELECT BELOW BASED ON INTERMENT TYPE							
☐ Placement of Cremated Ashes at Burial Site Including a Bronze Plaque - \$464.00							
☐ Placement of Cremated Ashes in Rose Garden Including a Bronze Plaque - \$464.00							
☐ Placement of Ashes in Single Niche including Bronze Plaque - \$464.00							
☐ Placement of Ashes in Double Niche including Bronze Plaque - \$516.00							
☐ Second Placement of Ashes in Double Niche including Bronze Plaque - \$464.00							
PAYMENT RECEIVED							
OFFICER NAME:							
RECEIPT NUMBER:			DATE PAID:				
CUSTOMER COPY GIVEN	☐ YES ☐ NO		DATE ISSUED:				