

LITHGOW CITY COUNCIL CEMETERIES APPLICATION FORM

(BLOCK LETTERS PLEASE)
APPLICANTS FULL NAME

FUNERAL DIRECTOR DETAILS (If Applicable)

ADDRESS:

ADDRESS:

TEL:

TEL:

RELATIONSHIP TO DECEASED.

DETAILS OF DECEASED PERSON/S

FULL NAME/S: AGE: DATE OF DEATH:

DETAILS OF BURIAL ALLOTMENT/NICHE/POSITION

CEMETERY:

SECTION: ALLOTMENT NO.: ROW:

COLUMBARIUM WALL/GARDEN: NICHE/POSITION NO.:

Signature of Applicant: Date:

PERMISSION for any work on or use of any burial allotment, niche/position which has been pre-purchased IS REQUIRED

I the holder/rightful successor of a Right of Burial for a burial allotment or holder of a Reserve Right to a Niche/Position do hereby consent to the application on this Right.

NAME OF OWNER OF RIGHT OF BURIAL/NICHE/POSITION (Purchaser/Executor/Inheritor)

PERMISSION GIVEN FOR WORK

(Signature of Owner of Right)

ASHES MEMORIALISATION

CREMATED REMAINS WITH:

WITNESS FOR ASHES INTERMENT/MEMORIALISATION INTO A GRAVE OR NICHE/POSITION YES/NO (cross out whichever is not applicable)

WORDING FOR PLAQUE (if required)

MONUMENTAL WORK

Permission to erect a monument, tomb, tablet, gravestone, vault, kerbing, railing or other structure in Council's cemeteries. If work being done by other than a Monumental Mason please submit a plan with the application detailing work with measurements, written permission is required before any work commences. Contact is to be made BY ALL with Council's Cemetery Officer (mobile 0407 079 288) before any work commences.

Details of skilled capacity to carry out work:

Details of proposed work:

Proposed Starting Date:

** PLEASE NOTE: Ensure that you have checked with Council the correct Cemetery, Section, Allotment Number, Row Number and Ownership of the Allotment BEFORE commencing any work IF THIS IS NOT DONE PERMISSION WILL NOT BE GIVEN.

SELECT APPLICATION REQUIRED BY TICKING BOX

- Purchase of Land (ROB) (Pur Lnd)
Burial Permission (Internmt)
Overtime (Internmt)
Plaques/Ashes memorialisation in Niche/Position (Columb)
Reserve Niche/Position (Columb)
Monumental Work (Other Inc)
Removal of Ashes Burial Allotments (Internmt)
Removal of Ashes Niche/Position (Columb)

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE.

By completion of this form you may be providing Council with personal information. Council will collect the information only for a lawful purpose directly related to the function of Council. We will take reasonable care not to disclose personal information. Exempt documents may come under Section 12 of the Local Government Act.

FOR OFFICE USE ONLY

Registration No.: ROB No.: Payment Register:

Fee Paid: \$.

Burial Register/Hard Copy Ashes Register:

Receipt No: \$.

Burial Index: Computer Index: Map: Grantee:

Date: /./.

SAMPLE WORDING FOR PLAQUES

Small

a)
In Loving Memory of
.....
Died 2nd October, 1951
Aged 66 Years
"At Rest"

b)
In Loving Memory of
Our Dear Father & Grandfather
.....
Died 3rd June 1951
Aged 50 Years

c)
In Loving Memory of
Our Beloved Daughter
.....
Born 1 January 1995
Died 26 February 1996
Aged 1 Year
"Forever in Our Hearts"

d)
In Loving Memory of
A Dear Wife and Mother
.....
Died 5th February 1955
"Remembered Always"

e)
In Loving Memory of
.....
2nd Infantry Battalion
Passed Away 21 April 1956
Aged 65 Years

f)
.....
Loved Husband of
Devoted Father and Grandfather
Born 26.8.1901 – Died 31.7.1991
Aged 90 Years
"Rest in Peace"

Large

a)
.....
Born 19 August 1928
Died 13 June 1995
Loved Wife of
Dearly Loved Mother of
.....&.....
and "Nan" to her 6 Grandchildren
Aged 67 Years

b)
In Memory of a Loving
Husband and Father
.....
26.8.1936 – 30.6.1996
Aged 60 Years
Loved and Remembered Always
Rest in Peace

c)
Smith – John William
Born 26th May 1920
Died 17th October 1990
Devoted Husband of
Dearly Loved Father of
.....and.....
Grandpa of 8 Grandchildren
"Never Forgotten"

d)
In Loving Memory of
.....
Born 5 June 1936 – Died 16 June 1995
Much Loved Wife of
Dearly Loved Mother of
.....and.....
Devoted "Nanna" to all her Grandchildren
"In God's Care"

e)
Smith – Katie Sue
Born 27.4.1972
Passed Away 31.8.1994
Aged 22 Years
Dearly Loved Daughter of
.....and.....
Loved Sister of.....
"Loved and Remembered Always"

Baby Memorial

a)
.....
Born.....Passed Away.....
Aged.....Hour
Dearly Loved (Daughter/Son)of
.....(and.....)
Loved (Sister/Brother)of
.....(.....and.....)
"Loved and Remembered Always"

b)
In Loving Memory of
.....
Stillborn (date).....
Cherished (Daughter/Son).....of
.....(and.....)
"Forever in (My/Our) Heart/s"

c)
In Loving Memory of
Our Beloved (Daughter/Son).....
.....
Born 1 January 1995
Died 26 February 1996
(Stillborn/Aged).....(Hour/Hours)
"An Angel in Heaven"

d)
Cherished Memories of
.....
(Passed Away/Stillborn)(Date).....
"Never Forgotten"
