

# Permit to Carry Out Work at a Gravesite Form

## Section 1: Builder or Monumental Mason Details:

Business Name:	
Contact Person:	
Phone Number:	

Acting as the agent on behalf of and with the authority of the Right of Burial holder/Applicant, apply for approval for the construction of:

Section 2: Type of Works:	Please Tick	2018/2019
Permit to erect Headstone, Tombstone, Memorial Stone, Flat Stone or other Monument	<input type="checkbox"/>	\$150.00
Double Grave Headstone	<input type="checkbox"/>	\$200.00
Vault or Mausoleum	<input type="checkbox"/>	\$550.00
Headstone on Ex-Servicemen's Graves	<input type="checkbox"/>	No Charge
Maintenance Work - Please note that this is limited to minor works such as painting or re-tiling. Replacement headstones will require fee to be paid.	<input type="checkbox"/>	No Charge
Other (please specify) :	<input type="checkbox"/>	Charges may apply
<b>TOTAL COST</b>	\$	
<b>Approximate Commencement Date of Works</b>		

## Section 3: Grave Details:

Cemetery:	
Family Name:	
Grave No:	

## Section 4: Applicant / Right of Burial Holder Details:

1. Title:		Given Name/s:		Surname:	
Postal Address:					
	Suburb:		State:		Postcode:
Phone No:		Mobile:			
Email Address:		Date:			

<p>a) Is the applicant the current Right of Burial Holder</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (continue to b)</p>
<p>b) Is the applicant the applicant named on the original Interment Consent Form?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No (continue to c)</p>
<p>c) If no Right of Burial Holder is assigned to plot, applicant must provide proof of relationship to the deceased e.g. Birth Certificate, Statutory Declaration or Last known will and testament</p> <p><input type="checkbox"/> Yes proof attached</p>

This approval is provided for the purpose of construction of a monument. Advice given by Applicants is relied upon by Council in good faith. Council does not accept any responsibilities for allowing any monument works to be constructed on a plot that might be the subject of a later dispute between family members, Executors and / or assigns.

I consent to the work described in this application being carried out and declare that the information in this application is true and correct. I understand Burdekin Shire Council may need to contact me directly to confirm details such as grave location or application details, and I acknowledge that I have the responsibility to maintain the memorial/place of interment in a safe and proper condition once completed.

Applicant / Right of Burial Holder Signature:		Date:	
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**Information Privacy Act 2009.** Burdekin Shire Council is collecting your personal information in accordance with the Local Government Act 2009. The information collected on this form will only be accessed by authorised Council officers for the purpose of updating Council's burial register. Your information will not be given to any other person or agency unless you have given us permission or we are required to do so by law.

**Office Use Only**

Print and Complete: Checklist for Cemeteries

Function ID

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