

APPLICATION FOR BURIAL IN GRAVE OR INTERMENT IN NICHE	
<b>TYPE OF APPLICATION</b>	<ul style="list-style-type: none"> <li>• ALL CEMETERY FEES AS PER COUNCIL'S CURRENT FEES AND CHARGES MUST BE PAID AT TIME OF APPLICATION.</li> <li>• A <b>FORM 9</b> OR <b>FORM 14</b> MUST ACCOMPANY THIS FORM.</li> <li>• COLUMBARIUM VESSEL MUST NOT EXCEED 21 CM LENGTH X 11 CM WIDTH X 8 CM HEIGHT (TAROOM CEMETERY ONLY).</li> <li>• COLUMBARIUM VESSEL MUST NOT EXCEED 22.5 CM LENGTH X 11 CM WIDTH X 8.5 CM HEIGHT (OTHER CEMETERIES).</li> <li>• APPLICATIONS MUST BE SUBMITTED NO LESS THAN TWO FULL BUSINESS DAYS PRIOR TO THE REQUIRED DATE AND TIME OF THE SERVICE.</li> </ul> <p> <input type="checkbox"/> Grave Site      <input type="checkbox"/> Ashes      <input type="checkbox"/> Niche      <input type="checkbox"/> Plaque only         </p>
<b>CEMETERY LOCATION</b> <small>(If requiring a preferred grave location, please contact Council first)</small>	<p>A grave / niche is required by the undersigned in accordance with the following particulars of the deceased.</p> <p> <input type="checkbox"/> Biloela Lawn Cemetery      <input type="checkbox"/> Moura Lawn Cemetery      <input type="checkbox"/> Theodore Cemetery  <input type="checkbox"/> Jambin Cemetery      <input type="checkbox"/> Baralaba Cemetery      <input type="checkbox"/> Cracow Cemetery  <input type="checkbox"/> Wowan Cemetery      <input type="checkbox"/> Biloela Old Cemetery  <input type="checkbox"/> Taroom Lawn Cemetery      <input type="checkbox"/> Taroom Monumental Cemetery         </p> <p>Section: _____ Grave / Niche No: _____ Reserve held: YES <input type="checkbox"/> NO <input type="checkbox"/></p>
<b>APPLICANT DETAILS</b> <small>Please note – Right Of Burial Certificate (if applicable) will be issued in the name of the applicant</small>	<p>Name: (Please Print) _____</p> <p>Contact No: _____ Relationship to deceased: _____</p> <p>Postal Address: _____</p> <p>Locality / Town: _____ State: _____ Postcode: _____</p> <p>Signature of Applicant: _____ Date: ____ / ____ / ____</p>
<b>RIGHT OF BURIAL HOLDER</b> <small>Please tick</small>	<p> <input type="checkbox"/> Applicant is the person in whose name the Right of Burial is issued  <input type="checkbox"/> Applicant acting with the full authority of the family of the deceased Right of Burial Holder  <input type="checkbox"/> Written authority is attached from the Right of Burial Holder  <input type="checkbox"/> The deceased is the Right of Burial Holder         </p>
<b>DECEASED DETAILS</b> <small>Please ensure that the full name and ALL details are supplied</small>	<p>Full Name: _____</p> <p>Late Residence: _____</p> <p>Locality / Town: _____ State: _____ Postcode: _____</p> <p>Former Occupation: _____</p> <p>Age: _____ Sex: _____ Date of Birth: ____ / ____ / ____ Place of Birth: _____</p> <p>Date of Death: ____ / ____ / ____ Religion: _____</p> <p>Does the deceased have a registered dog/s in the Banana Shire? (If yes, please complete a Change of Information for Dog Registration form): Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<b>FUNERAL DETAILS</b>	<p>Date and hour of Funeral: ____ / ____ / ____ am / pm</p> <p> <input type="checkbox"/> Oversize Coffin Details: _____  <input type="checkbox"/> Graveside Service      <input type="checkbox"/> Church Service Details: _____         </p> <p>Minister's Name: _____</p>
<b>FUNERAL DIRECTOR</b> <small>Note – No lowering equipment is available from Council</small>	<p>Name: _____</p> <p>Postal Address: _____</p> <p>Locality / Town: _____ State: _____ Postcode: _____</p> <p><i>I acknowledge that payment of fees is required prior to burial &amp; that no invoice for fees will be issued.</i></p> <p>Signature: _____</p>
<b>PRIVACY NOTICE</b>	<p>Banana Shire Council is collecting your personal information to process your application. The information will not be disclosed to any other person or agency external to council without your consent, unless required by or authorised by law. Personal information will be handled in accordance with the <i>Information Privacy Act 2009</i></p>
<b>OFFICE USE ONLY</b>	<p>Receipt No: _____ Receipt Date: _____ Receipt Emailed: _____</p> <p>Entered On Computer Register: _____ Updated on website: _____</p> <p>Record of Burial Issued: Yes <input type="checkbox"/> No <input type="checkbox"/> Date: ____ / ____ / ____</p> <p>Right of Burial Issued: Yes <input type="checkbox"/> No <input type="checkbox"/> Certificate No. _____ Date: ____ / ____ / ____</p> <p>Map Noted: Yes <input type="checkbox"/> No <input type="checkbox"/> Folder Noted: Yes <input type="checkbox"/> No <input type="checkbox"/> Tasked via Magiq: Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<b>BIRTHS DEATHS &amp; MARRIAGE</b>	<p>Batch Date: _____ Batch ID#: _____ Record Key: _____</p>