

# BURIAL/INTERMENT ORDER (Port MacDonnell Cemetery)

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Last Updated:	24 <sup>th</sup> May 2023
Form Ownership:	Administration Officer - Works
Relevant Policy/Act:	8.3 Cemetery

**DATE OF ORDER:** .....

## **DECEASED DETAILS**

Surname: ..... Given Names: .....

Last Address: .....

Date of Birth: ..... Place of Birth: .....

Date of Death: ..... Age at Death: .....

Place of Death: .....

Marital Status: ..... Denomination: .....

## **APPLICANT DETAILS**

Name: ..... Relationship to Deceased: .....

Address: ..... Phone Number: .....

Email: .....

## **LOCATION**

☐ Burial Section Section: ..... Lot: .....

☐ Cremation Memorial Garden Lot: .....

## **INTERMENT ORDER DETAILS**

Is a new Interment Order required? ☐ Yes ☐ No

If Yes, details of New Interment Right Holder:

Name: .....

Address: .....

Phone Number: ..... Email: .....

If No, details of existing Interment Right Holder: Name: .....

## **TRANSFER OF EXISTING INTERMENT RIGHT HOLDER**

Name of new Interment Right Holder: .....

Address of new Interment Right Holder: .....

Phone Number: ..... Email: .....

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## BURIAL/INTERMENT DETAILS

Date of Burial/Interment: ..... Time: .....

Burial: Grave Depth: ☐ Single (1.67m) ☐ Double (2.13m) ☐ Triple (3.05m)

Position: ☐ North ☐ Centre ☐ South

Coffin Dimensions: Width: ..... Length: ..... Height: .....

Interment of Cremated Remains: ☐ Cremation Urn ☐ Other Receptacle: .....

Person/Minister Officiating: ..... Name of Funeral Director: .....

Signature of person signing this order: .....

Name: .....

Address: .....

Phone Number: ..... Email: .....

## OFFICE USE ONLY

Cemetery Register: Date: ..... No: ..... Invoice Details: No: ..... Amount: .....

Doctors Certificate Sighted: Date: ..... Signed: .....

Certificate of Identification of Deceased Sighted: Date: ..... Signed: .....

Name Plate: First Name: ..... Surname: ..... Date of Death: ...../...../.....

Grave Re-opened: Yes / No Buried With: .....