

ABN: 45 596 234 931

Application for Reservation of Grave Site

DETAILS OF APPLICANT/S

Applicant One	Applicant Two (if multiple burial)
Full Name:	Full Name:
Address:	Address:
.....Postcode:Postcode:
Tel:	Tel:
Gender: DOB:.....	Gender: DOB:.....
Email:	Email:

Cemetery:

Cemetery Section: **Lawn / Semi-Lawn / Concrete Stripping / Monumental / General / Nursery**

DETAILS OF NEXT OF KIN

Name:

Address:

..... Postcode:

Relationship to Applicant:

Telephone Number:(A/H).....(B/H)

Email:

Forward documentation to Applicant One / Applicant Two / Next of Kin (*choose one*)

IMPORTANT NOTICE – Privacy Statement

Scenic Rim Regional Council is collecting your personal information in accordance with Local Law No. 4 (Cemeteries) in order to assess your application. The information will only be accessed by Scenic Rim Regional Council for Council business related activities only. Your information will not be given to any other person or agency unless you have given us permission or we are required by law. Your personal information is handled in accordance with the *Information Privacy Act 2009*.

Signature:Date:

OFFICE USE ONLY

Fees Paid: \$	Doc Set ID:	Date Recd:
Receipt No:	Resp. Officer:	
Date:	File Number:	Index Link: