

# Application for burial right holder

Cemeteries



Folder 119615    Workflow Burial Right Hold    Doc ID \_\_\_\_\_    Box No \_\_\_\_\_

This application must be acknowledged by a customer service representative in person or by phone.

Pursuant to Council Policy 252 - *Cemeteries*, a burial right holder holds the right to authorise the burial and/or cemetery works to a particular grave.

## APPLICANT DETAILS – Applicant holds the rights to the burial site while alive

|                                |   |  |          |
|--------------------------------|---|--|----------|
| Surname                        |   | Given names                            |          |
| Date of birth                  | Gender<br><input type="radio"/> Male <input type="radio"/> Female | Relationship to the reserve / deceased |          |
| Postal address                 |   | State                                  | Postcode |
| Contact number                 | Email address   |  |          |
| Additional contact information |   | Signed                                 |          |

## CEMETERY DETAILS

|          |  |            |  |
|----------|--|------------|--|
| Cemetery | Cemetery Type<br><input type="radio"/> Lawn <input type="radio"/> Monumental <input type="radio"/> Columbarium |            |  |
| Section  | Row  | Plot/Niche |  |

## DECEASED DETAILS (if applicable)

|         |            |              |
|---------|------------|--------------|
| Surname | First name | Middle names |
|---------|------------|--------------|

## DETAILS OF BURIAL RIGHT HOLDER 1

|                  |   |  |          |
|------------------|---|--|----------|
| Surname          |   | Given names                            |          |
| Date of birth    | Gender<br><input type="radio"/> Male <input type="radio"/> Female | Relationship to the reserve / deceased |          |
| Postal address   |   | State                                  | Postcode |
| Contact number/s | Email address   |  |          |
| Signed           |   | Date                                   |          |

## DETAILS OF BURIAL RIGHT HOLDER 2

|                  |   |  |          |
|------------------|---|--|----------|
| Surname          |   | Given names                            |          |
| Date of birth    | Gender<br><input type="radio"/> Male <input type="radio"/> Female | Relationship to the reserve / deceased |          |
| Postal address   |   | State                                  | Postcode |
| Contact number/s | Email address   |  |          |

## DETAILS OF BURIAL RIGHT HOLDER 3

|                  |   |  |          |
|------------------|---|--|----------|
| Surname          |   | Given names                            |          |
| Date of birth    | Gender<br><input type="radio"/> Male <input type="radio"/> Female | Relationship to the reserve / deceased |          |
| Postal address   |   | State                                  | Postcode |
| Contact number/s | Email address   |  |          |

## LODGEMENT OF YOUR APPLICATION

MAIL Chief Executive Officer, PO Box 390, Gayndah, Qld 4625

EMAIL [admin@northburnett.qld.gov.au](mailto:admin@northburnett.qld.gov.au)

TELEPHONE 1300 MY NBRC (1300 696 272)

IN PERSON Visit our customer administration offices 8.30am – 4.30pm (closed 11.30am – 12.30pm)

## OFFICE USE ONLY

|                           |                      |
|---------------------------|----------------------|
| Information received from | Date and time        |
| NBRC Receiving Officer    | NBRC contact officer |