

Application for plaque

Cemeteries



Folder 119623 Workflow Plaque Doc ID _____ Box No _____

Council agrees that plaque inscription must include the name, age and date of death of the individual. Pursuant to Council *Policy 252 – Cemeteries*, applicable costs are to be paid in full, on approval of plaque quote and proof.

DECEASED DETAILS

Surname		First name		Middle names
Cemetery	Section	Row	Plot/Niche	Cemetery Type <input type="radio"/> Lawn <input type="radio"/> Monumental <input type="radio"/> Columbarium

APPLICANT DETAILS

Surname		Given names		
Postal address			State	Postcode
Contact number	Email address			
Relationship	Are you a burial right holder? <input type="radio"/> Yes <input type="radio"/> No		Preferred contact method <input type="radio"/> Telephone <input type="radio"/> Mail <input type="radio"/> Email	

APPLICATION PROCESS

1. Complete this application
2. Provide high resolution digital images to Council if you are using photographs on plaque
3. Receive proof and costs for plaque from Council
4. Reply to Council with amendments if necessary and/or approve final proof and costs of plaque
5. Make payment of fees due as advised by Council
6. Receive advice from Council that plaque has been installed

PLACEMENT DETAILS

Completed <i>Application for Interment</i> ? <input type="radio"/> Yes <input type="radio"/> No	Does the family wish to be present at the time the plaque is being placed? <input type="radio"/> Yes (please contact Council to arrange) <input type="radio"/> No
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SIGNED

Signature	Date
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LODGEMENT OF YOUR APPLICATION

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

EMAIL 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 by	Date and time	NBRC contact officer
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PLAQUE DETAILS

Single (complete if required)

Lawn Niche Other

Design no:

Size:

Double (complete if required)

1st side/detachable plate 2nd side/detachable plate Both (Attach 2 x Plaque Options Page)

Shape

Standard Rectangle Oval (lawn only) Other:

Colour

Brown Light Brown Pale Pink Fuchsia Burgundy Red
 Teddy Blue Trac Blue Dark Blue Teal Turquoise Green
 Violet Black

Border

Standard (9) Floral (2) Fancy Floral (7) Woven (4) Thick Woven (6)
 Roman (2) Leaves (10) Heart (15) Star (27) Other:

Photograph / Emblem

Left Placement Centre Placement Right Placement Other Placement

Emblem number: Or Image attached: If other placement, please describe:

Photograph Border

No Border Standard Thick Woven

Photograph Details

Please provide a high resolution photograph in digital format with your application.

Note: Use of emblems and photographs may reduce lines available for wording.

19mm 27mm 30mm 1.8 x 2.4cm 2.5 x 3.5cm 3 x 4cm

LINE SEQUENCE

Refer to Worssell Design number for available lines. Please order the sequence if using optional lines.

Un-ordered sequences will be ordered automatically starting from Line 1 "IN LOVING MEMORY OF" or "CHERISHED MEMORIES OF" and increasing up to available lines.

Lines marked with an asterisk (*) are required.

Line:

IN LOVING MEMORY OF CHERISHED MEMORIES OF TREASURED MEMORIES OF
 Other:

Line:

Surname **First name** **Middle names**

Other

Line:

WHO PASSED AWAY WHO PASSED AWAY ON WHO DIED WHO DIED ON
 Other:

Line:

Date of death: Date in full Numerical date Other:

Line:

Age of Aged years Aged years and months
 Other:

Line:

LOVED AND REMEMBERED ALWAYS IN GOD'S CARE
 Other:

Line:

Line:

PLAQUE LAYOUT

Applicant to complete this section only if necessary i.e. If customer cannot accommodate their requirements above, otherwise attach final plaque proof with completed *Customer Authorisation* to this application