**Application for an Interment Right**

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| --- |
| Under Section 56(2) of the *Cemeteries and Crematoria Act 2013,* an application for an interment right must be in the form approved by Cemeteries & Crematoria NSW (CCNSW) No approved (mandatory) form is currently in place. This document has been prepared as a template certificate for use by operators until such time that a form is approved by Cemeteries & Crematoria NSW. |

1. **Operator** [insert name of operator]
2. **Premises** [insert name of cemetery/crematoria], [insert address].
3. **Your name and details (You will be the interment right holder)** [duplicate the table if there is to be more than 1 holder (joint holders)]

|  |  |
| --- | --- |
| Full name | <Insert given name, middle name(s) and surname> |
| Home address | <Insert residential address including suburb, state and postcode> |
| Postal address (if different) | <Insert postal address including suburb, state and postcode> |
| Phone | <Insert contact phone number> |
| Email | <insert address> |

1. **Person(s) to be interred**

**Option 1 – Identity of the person(s)** [duplicate the table if there is more than 1 person specified at this time]

*Use this option if the identity of the person(s) to be interred is known.*

|  |  |
| --- | --- |
| Full name  | <insert given name, middle name(s), surname> |
| Date of birth | <insert date of birth> |
| Date of death | <insert date of death if the person is to be interred now> |
| Home address | <insert residential address including suburb, state and postcode> |
| Postal address (if different) | <insert postal address including suburb, state and postcode> |

**AND/OR**

 **Option 2 – Class of person(s)**

*Use this option if you would like to specify a group of people (legally known as a class of persons) who may be interred, such as your family members, siblings, grandchildren, etc. Note that if you are purchasing an interment right for a site which allows multiple interments, you may identify a specific person(s) to be interred as well as a class of person(s) for the balance of the interments.*

|  |  |
| --- | --- |
| Class of persons to be interred  | <insert details of the class (group) of persons> |

**OR**

 **Option 3** – **Nomination to occur in the future**

*Use this option if you, as the interment right holder, wish to authorise another person to, at a future time, be able to nominate the person(s) or class of person(s) to be interred.*

|  |  |
| --- | --- |
| Full name | <Insert given name, middle name(s) and surname> |
| Home address | <Insert residential address including suburb, state and postcode> |
| Postal address (if different) | <Insert postal address including suburb, state and postcode> |
| Phone | <Insert contact phone number> |
| Email | <insert address> |

1. **Further contacts for the interment right holder (next of kin or other secondary contact)**

|  |  |
| --- | --- |
| Full name | <Insert given name, middle name(s) and surname> |
| Home address | <Insert residential address including suburb, state and postcode> |
| Postal address (if different) | <Insert postal address including suburb, state and postcode> |
| Phone | <Insert contact phone number> |
| Email | <insert address> |

1. **Type of interment right requested:**

[ ]  Perpetual

[ ]  Renewable Initial term: \_\_\_\_\_\_\_\_\_

1. **Requested interment site** (if requesting a specific site or area of the cemetery) [amend this table if needed to describe your sites and areas]

|  |  |
| --- | --- |
| Type | <Insert> |
| Denomination | <Insert> |
| Area | <Insert> |
| Section | <Insert> |
| Row | <Insert> |
| Plot | <Insert> |
| Other detail | <insert> |

1. **Requested related services**

Specify any related services you wish to request in addition to the burial or placement of ashes into the interment site specified above:

[ ]  Cremation [ ]  Memorial service
[ ]  Memorial, monument or plaque [ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Requested religious and cultural requirements**

[If no requirements write ‘None’]

1. **Requested Aboriginal cultural or spiritual requirements**

[If no requirements write ‘None’]

1. **Other interment right holder requests**

[If no additional requirements write ‘N/A’]

1. **Price and Payment**

The price for the interment right and any associated services will be confirmed in the contract, which will be prepared by the operator on the basis of the things requested in this application form.

After the contract is signed, an invoice will be generated and sent to you using the details provided.

If you will not be the person making the payment, please provide their contact details here:

|  |  |
| --- | --- |
| Name | <Insert given name, middle name(s) and surname> |
| Address | <Insert residential address including suburb, state and postcode> |
| Postal address (if different) | <Insert postal address including suburb, state and postcode> |
| Phone | <Insert contact phone number> |
| Email | <insert address> |

1. **Privacy information**

[Operators to include own privacy collection notices based on privacy laws applicable to them]

1. **Interment right holder declaration**

I understand that this application form represents a request for an interment right, which will be confirmed along with any associated services and the pricing for both the right and the services in the operator contract. All information that I have provided in this application is true and correct.

Signature Date