

Application for Burial – Pinjarra Cemetery

Personal Particulars

Name of Deceased:		Male / Female	Age:
Date of Birth:		Date of Death:	
Birthplace of Deceased:		Place of Death:	
Last place of Residence:		Occupation of Deceased:	
Sudden Death / Coroners Case	Cause of Death:		

Funeral Details

Funeral Director:		Ph:
Date of Burial: <i>Tuesday - Friday</i>		Time of Burial: <i>10am – 2pm</i>
Name of Celebrant:		
From where is Funeral to start:		
Minister to officiate at grave:		

Grave Details

Reserved Grave:	Yes / No	Grant of Right of Burial No:
Denominational Ground:		Lot:
Coffin Size:		
Date of Last Interment:		
Name of Last Interment:		

Continued ...

Declaration: I hereby certify that I am the applicant for this interment and have authority for the use of the grave:

- I am the person in whose name the Grant is issued.
- I am the personal representative of the Grant Holder.
- I am the person acting expressly on behalf of the Holder's Representative.
- None of the above persons is immediately available or ascertainable and I hereby authorise use of the grave.

Applicant: Signature: _____

Name: _____

Address: _____

To the best of my knowledge the answers given to the questions below are true:

The Executor or nearest surviving relative of the Deceased:

Name: _____

Address _____

Phone Number: _____

Relationship to the Deceased: _____

If you are not the Executor or nearest surviving relative, state why the application is made by you and not by an executor or nearest surviving relative:

Funeral Director Signature: _____

Shire Cemetery Officer Signature: _____

Please return this form to the Shire of Murray either by email to mailbag@murray.wa.gov.au, fax to 9531 1981 or post to PO Box 21, Pinjarra WA 6208.

Office Use Only

Synergy App #: _____ Register of Burials: _____ Grant of Right #: _____

Paid: \$ _____ Receipt No: _____