



Cemeteries

Plot authority application

This form is required where the plot or grave to be used for an interment or scattering has:

- been pre-purchased / reserved.
- had an interment already take place.

Please use full legal names as listed on birth/death certificates.

Applicant details

Surname	<input type="text"/>	First names	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>
Address	<input type="text"/>		
Date	<input type="text"/>	Signature	<input type="text"/>

Deceased details

Surname	<input type="text"/>	First names	<input type="text"/>
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Plot details

Cemetery	<input type="text"/>	Plot number	<input type="text"/>
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Previously interred

Surname	<input type="text"/>	First names	<input type="text"/>
Surname	<input type="text"/>	First names	<input type="text"/>

Authority

Please complete either section A or B –

A Interment holder/executor

I am the exclusive right of interment holder or their executor and hereby consent to a interment or scattering taking place in this plot or grave.

Surname	<input type="text"/>	First names	<input type="text"/>
Date	<input type="text"/>	Signature	<input type="text"/>

B Funeral director/agent for the family

I am the funeral director or agent for the family and have carried out due enquiry and am satisfied that the use of this plot or grave is authorised.

Funeral director name	<input type="text"/>	Company	<input type="text"/>
Date	<input type="text"/>	Signature	<input type="text"/>

Office use only

This Cemeteries Plot Authority is hereby approved by the Cemeteries Manager.

Date	<input type="text"/>	Signed	<input type="text"/>
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