Application for Works within Councils Cemeteries

Applicant:	
Address:	
Phone:	
Date of Application:	

Request to:

☐ Replace Monumental Headstone   ☐ Request Council pour base for
☐ Clean Headstone   Lawn Cemetery Headstone
☐ Alter or correct inscription   ☐ Erect new headstone

Other:_____.

Description of works:

Name of Deceased:_____.
Cemetery/Columbarium:_____.
Section:_____Row:_____Allotment:_____.

Date requested for works to be carried out prior to: ___/___/_____.

Office use only:
Received by:_____ Date: ___/___/_____.
Referred to:_____ Date: ___/___/_____.

Notes:

Completed by:_____ Date: ___/___/_____.