



APPLICATION FOR WORKS WITHIN COUNCILS CEMETERIES



Applicant Details and Declaration

Applicants Full Name: _____

Address: _____

Phone: _____ Mobile: _____

Email: _____

Applicants Signature: _____ Date: _____

Deceased Details

Full Name of Deceased: _____

- | | | |
|---|---|---|
| <input type="checkbox"/> Kyogle Cemetery | <input type="checkbox"/> Bonalbo Cemetery | <input type="checkbox"/> Old Bonalbo Cemetery |
| <input type="checkbox"/> Mallanganee Cemetery | <input type="checkbox"/> Tabulam Cemetery | <input type="checkbox"/> Woodenbong Cemetery |
| <input type="checkbox"/> Burial | <input type="checkbox"/> Columbarium Wall | |

Portion (if applicable) _____ Section/Wall: _____ Row: _____ Plot/Niche: _____

- | | |
|---|--|
| <input type="checkbox"/> Replace Monumental Headstone | <input type="checkbox"/> Clean Headstone |
| <input type="checkbox"/> Alter or correct inscription | <input type="checkbox"/> Erect new headstone |
| <input type="checkbox"/> Request Council to pour base for Lawn Cemetery Headstone | |

Other: _____

Description: _____
