Full Name of Deceased:

Section: Grave No:

Name of Applicant:

Acting For (if applicable)

Address of Applicant:

Postcode:

**I HEREBY CERTIFY THAT I AM AUTHORISED AS/BY THE HOLDER OF THE GRANT OF RIGHT OF BURIAL FOR THE ABOVEMENTIONED GRAVE TO APPROVE ERECTION OF THE MEMORIAL DETAILED HEREIN AND I ACCEPT THAT THE APPROVAL ISSUED WILL BE SUBJECT TO CONDITIONS STIPULATED IN THE CEMETERIES ACT, THE GRANT OF RIGHT OF BURIAL AND THE LOCAL LAWS AND REGULATIONS NOW OR HEREAFTER IN FORCE.**

Signature Date

NOTE: The Shire of Yilgarn is indemnified against any liability attributed to any incorrect statements or information contained in this form.

**FEES PAYABLE (SEE SCHEDULE OF FEES)**

Placement Fee $\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLAN AND SPECIFICATIONS**

Please provide plans and specifications with the application.

NOTE: All plans and specifications of memorials submitted must be carefully drawn and **FULLY** dimensioned and all materials specified. Must comply with AS4204-1994. All descriptions to be in BLOCK LETTERS, all ornaments etc, to be shown and dimensioned.

**DETAILS OF MASON**

Name of Firm:

Address:

Contact Number

Licence Number (Issued by the Shire of Yilgarn)

**Payment due on the Shire of Yilgarn’s approval of the memorial.**

**SCHEDULE OF FEES**

Permission to erection a monument-$52.00

Permission to place a headstone-$31.00

Permission to place a nameplate-$11.00

**CEMETERY USE ONLY**

Application No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Granted on

Subject to the following conditions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorised Person Name of Authorised Person

**Final Inspection**

Is monument in accordance with original application: Yes/No

If no state why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does monument comply with all Shire regulations and Standards Yes/No

If no state why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Inspection: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorised Person

**Please Note**

**The Shire of Yilgarn reserves the right to direct that the memorial be modified or dismantled and removed from a cemetery where:**

* **The stated dimensions on the application of the memorial constructed are contrary to the Act, Local Laws, policy and standards set by the Shire, and any conditions or directions given in respect of;**
* **The memorial is constructed outside the location of the grave.**