**APPLICATION FOR MEMORIAL**

(Subject to the RULES & REGULATION OF THE CEMETERY AUTHORITY)

**MONUMENTAL MASON**

I/We ………………………………………………………………………………………….…………………..

…………………………………………………………………………(Business Name, Address & Telephone No)

apply for permission for (Please select one of the following)

* New monument and inscription (Drawing of monument and dimensions required)
* Additional inscription (if not in English, please provide a translation)
* Cremation Memorial Plaque
* Other work (Please describe)

**DETAILS OF DECEASED**

Full Name …………

Date of Death

Buried Within: LOXTON WAIKERIE RAMCO KINGSTON ON MURRAY

MOOROOK OTHER ……………………..

All works must be carried out in accordance with the provisions of Australian Standard AS4204-1994, the plans and specifications attached comply with the rules, regulations and directions of the relevant Cemetery Authority.

Signed Date Fee $

(Monumental Mason)

**CHECKLIST**

* Scaled Drawing of monument with dimensions (Monument Plan Scale 1:10)
* Monument Inscriptions and any Epitaphs (if not in English, please provide a translation)
* Material of New Monument

**THIS APPLICATION IS NOT VALID UNTIL APPROVED BY COUNCIL**

**OFFICE USE ONLY:**

Section: Row/Path: No:

Right of Interment No: Interment No:

Authorised By:

Date:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **AUTHORISED PERSON DETAILS - please enter ALL details and indicate as applicable (tick)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Title: | Dr | | | | Mr | | Ms | | Mrs | | Miss | | | | | Gender: | | | | M | | | F | | Date of Birth: | | |  |
| First Name/s: | | | |  | | | | | | | | | | | Last Name: | | | |  | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Suburb: | |  | | | | | | | | | | | | State: | | | |  | | | | | | Postcode: | | | |  |
| Tel (W): | | | ( ) | | | | | | | Tel (H): | | ( ) | | | | | | | | | | Mobile: | | | |  | | |
| Relationship to Deceased: | | | | | |  | | | | | | | Email: | | | |  | | | | | | | | | | | |
| **I acknowledge that I have read and understand my rights and responsibilities and declare that I am the interment right holder or a person authorised to exercise the interment right in accordance with the conditions listed below.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Declare that I: (Please select one of the following)

* Am the person in whose name the **Interment Right** is issued.
* Have the written authority of the person, or the Executor of the Estate in whose name the **Interment Right** was issued.
* Am the Legal Representative of the **Interment Right Holder**.

I warrant that all information given is correct and consent to the work described in this application being carried out.

As owner, I acknowledge that I have a responsibility to maintain the monument in thorough order and condition during the term of the **Interment Right** and, if I do not, the Cemetery Authority has the right to remove it and recover the cost of doing so from me as a debt payable on demand.

I acknowledge responsibility to remove the monument on expiry of the **Interment Right** subject to any right of renewal.

I do agree to indemnify and hold harmless the Cemetery Authority against any claims, actions, liability, loss or damage or expense arising to or against the Cemetery Authority in respect to the monument, the condition or repair of or damage to the monument, or the removal of the monument occurring at any time after the installation of the monument.

I understand that if the headstone or memorial is not removed within two years of the **Interment Right** for the site expiring, the Cemetery Authority has the legal right to remove the headstone or memorial and dispose of it as the see fit (Cemetery Regulations 2014).

**I also acknowledge that it is my responsibility to advise the Cemetery Authority of any change of my address**.

(Signature of Interment Right Holder or Legal Representative)

Before Me:

(Signature of Witness)

(Print Name of Witness)

**CONDITIONS**

**MONUMENTS – LAWN AND BEAM SECTION**

1. All monuments are to be of first grade granite, marble or other durable natural stone. Plaques and ornamented fixtures or fittings are to be of non-ferrous material.

2. ***DIMENSIONS***

**MAXIMUM HEIGHT** including base 1050 mm

**MAXIMUM WIDTH** 950 mm provided that where a Interment Right relates to a double plot, the measurement may not exceed 2200 mm.

**MINIMUM THICKNESS** 50 mm

**MONUMENT BASES** Maximum Measurements: **Width** 950 mm

**Depth** 350 mm

**Thickness** 200 mm

**CREMATED REMAINS MEMORIAL PLAQUES**

***Waikerie, Ramco and Kingston on Murray Rose Gardens***

1. All plaques to be of first grade bronze material.
2. ***DIMENSIONS***

**MAXIMUM HEIGHT** 146 mm

**MAXIMUM WIDTH** 381 mm

1. Plaques are to have two lugs on the rear of it for fitting to concrete kerbing

***Loxton Standard Niche Wall and Rose Garden***

1. All plaques to be of first grade bronze material.
2. ***DIMENSIONS***

**MAXIMUM HEIGHT** 111 mm

**MAXIMUM WIDTH** 149 mm

1. Plaques are to have two lugs on the rear of it for fitting to concrete kerbing and wall

***All Other Cremain Memorials***

Please refer back to Council for dimensions.