

SHIRE OF MINGENEW PUBLIC CEMETERY

Application for Monumental Works

Details of Deceased:	
Name:	
Cemetery:	
Area & Plot	
Number:	
etails of Applicant:	
Name:	
Address:	
Telephone:	
Email:	
Being the:	O Registered Right of Burial Grantee (Copy of Existing Grant Certificate must be attached)
	O Bearer of Required Authorisation (Statutory Declaration Attached)
Signature of Applica	nt: Date:
n this form.	enew is indemnified against any liability attributed to any incorrect statements or information contained be completed by Mason)
Name of Business:	
Address:	
Quoted Cost:	Date:
Signature of Mason:	
Are you seeking approval to:	O Install a new memorial
	O Remove or add further monumental work
	O Add further inscription



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Fees & Charges Application Fee: \$50.00 Office Use Only: **Application Number:** Permit Number: Approved By: Date: O Additional Conditions specified Name of Deceased: This application for a proposed memorial must include: Detailed plans & specifications drawn to scale and fully dimensioned. Details and dimensions of proposed foundations and any attachments. A copy of the inscription. **Overall Monument Dimensions (mm)** Length: Height: Width: The Shire of Mingenew reserves the right to direct that the monument be modified or dismantled and removed from the cemetery where: The stated dimensions on the application of the memorial constructed are contrary to the Cemeteries Act 1986 & Local Law, The memorial is constructed outside the location of the grave. **INSCRIPTON:**