

PLAQUE PLACEMENT ONLY FORM

CEMETERY DETAILS

Beaconsfield Cemetery Frankford Cemetery Winkleigh Cemetery

PLACEMENT LOCATION

- Lawn Cemetery - Beaconsfield and Winkleigh only
 Rose Garden - Beaconsfield only
 Niche Wall - all cemeteries

Placement of plaques in Councils Monumental sections are the responsibility of the deceased's Next of Kin.

PLACEMENT OF PLAQUE DETAILS

Row: _____ Plot: _____ Special Instructions: _____

APPLICANT DETAILS

Note: The Right of Burial Holder's details, including name and contact information, will be disclosed in circumstances where a person is seeking to apply to Council to make alterations to the burial site, which can include transfer/surrender of the site, interment application for the burial and/or application for the installation of a memorial on the site.

Family Name: _____

Given Names: _____ Date of Birth: ___/___/___

Postal Address: _____

Suburb: _____ Post Code: _____

Email Address: _____ Phone Number: _____

Relationship to deceased: _____

DETAILS OF DECEASED

Family Name: _____

Given Names: _____

Date of Birth: ___/___/___ Date of Death: ___/___/___ Age at Death: _____

Last Known Address: _____

Suburb: _____ Post Code: _____

Veteran: Yes No If Yes, details of service history or duty performed: _____

APPLICANT DECLARATION

- I, the applicant, am over the age of 16 and the Next of Kin of the deceased;
- I am aware that it is an offence to knowingly provide false or misleading information and I acknowledge that the Right of Burial Holder will have all rights and responsibilities in relation to further burials and/or construction of monuments on the site nominated above.

Please see Councils current fees and charges for cemetery fees.

**** Plaque sizes must not exceed 14cm wide x 13cm for Rose Garden Interments or 17cm wide x 15cm high for the Niche and Colonnade Walls****

Applicant Name: _____

Signature: _____ **Date:** ____/____/____

Personal Information Protection Statement

1. Personal information is managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by the individual to whom it relates, on request to the West Tamar Council.
2. Information can be used for other purposes permitted by the *Local Government Act 1993* and regulations made by or under that Act, and, if necessary, may be disclosed to other public sector bodies, agents, or contractors of the West Tamar Council, in accordance with the Council's Personal Information Protection Policy.

Information on this form is required to ensure compliance with the following:

Burial and Cremation Act 2019
Burial and Cremation Regulations 2025

OFFICE USE ONLY

Plaque received by: _____ Date: ____/____/____

Adhered by: _____ Date: ____/____/____

Photo taken: Yes No

Receipt #: _____ Amount Paid: \$ _____

Or

Invoiced Amount: \$ _____ Date: ____/____/____

Cemetery Manager Signature: _____