

Application Start Date (office use only):

Applicant Details *for NEW interment rights this person will be the Interment Right Holder unless otherwise specified*

First Name:		Middle Name/s:	
Surname:			DOB:
Address:			
City:		State:	Postcode:
Phone:	Email:		

New Interment Right

Name of Cemetery:					
Plot Type:	<input type="checkbox"/> Burial	<input type="checkbox"/> Lawn	<input type="checkbox"/> Niche	<input type="checkbox"/> Garden	<input type="checkbox"/> Martungka Natural Burial
Plot No/s:	Term:		<input type="checkbox"/> 50 years	<input type="checkbox"/> 100 years	<input type="checkbox"/> In Perpetuity

Renewal Interment Right

Name of Cemetery:					
Plot Type:	<input type="checkbox"/> Burial	<input type="checkbox"/> Lawn	<input type="checkbox"/> Niche	<input type="checkbox"/> Garden	<input type="checkbox"/> Martungka Natural Burial
Interment Right No:		Plot no/s:			
Start Date:	Term:		Expiry Date:		
Renewal term (5 years minimum):		<input type="checkbox"/> 50 years	<input type="checkbox"/> Other		
New Expiry Date:		New Total Term:			
Interment Right Holder is Applicant: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>if No, complete Holder details below if known</i>					
Full Legal Name of Interment Right Holder:					
Address:					
City:		State:	Postcode:		
Phone:	Email:				

Signature

Please read the Adelaide Hills Council Cemetery Operating Policy, Memorials within Council Cemeteries policies and any other relevant policies prior to applying.

Signature:	Date:
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OFFICE USE ONLY

Location Code:		Start Date:	
New/Renewal Interment Right Sent: <input type="checkbox"/>	Signed PES returned: <input type="checkbox"/>	Entered: CMS <input type="checkbox"/>	MAPS <input type="checkbox"/>

Invoice to:				<input type="checkbox"/> Invoiced
<input type="checkbox"/> Application for Interment Right (new or renewal)				\$
<input type="checkbox"/> Interment Right	No. of plots:	@ \$	Term:	\$
<input type="checkbox"/> Renewal I/Right	No. of plots:	@ \$	Term:	\$