

(Office Use) Customer Number:

# APPLICATION FOR BURIAL & ASH INTERMENT



## 1 APPLICATION FOR

Burial  Ash Interment  Double Ash Interment

**At:**  **Cemetery**

## 2 DECEASED'S DETAILS

Mr  Mrs  Ms  Miss

Surname:

Forename/s:

Known As:

Age:

Occupation:

Gender:

Male

Female

Residential Address (last known):

Date of Birth:

Place of Birth:

Date of Death:

Place of Death:

Nationality:

Religion:

Medical Certificate received\*

Coroner's Authorisation received\*

*\*Please note: A medical certificate or Coroner's Authorisation must be provided.*

## 3 BURIAL BOOKING DETAILS

Day:

Date:

Arrival Time:

AM / PM

## 4 INTERMENT TYPE

New Plot

Pre-purchased plot\*

Reopen\*

*\*A pre-purchased plot or reopen also requires the authority to open a pre-purchased or occupied plot form.*

## 5 PLOT DETAILS

Area/Section:

Block:

Plot:

### BURIAL:

Single Depth

Double Depth

2nd Interment

1st Interment

### ASHES:

1st Interment

2nd Interment

3rd Interment

4th Interment

## 6 CASKET/URN DETAILS

Casket/Urn Size (mm): Length

Width

Height

Casket/Urn Shape:

## 7 GRAVESIDE DETAILS

Expected number of attendees at Cemetery:

## 8 SPECIAL INSTRUCTIONS

## 9 FUNERAL DIRECTOR'S DETAILS

Name:

Company:

Phone:

Email:

Signature:

Date:

## 10 PURCHASER OF BURIAL RIGHTS DETAILS (NEXT OF KIN)

Mr

Mrs

Ms

Miss

Surname:

Forename/s:

Residential Address:

Phone:

Mobile:

Relationship to Deceased:

Email:

Signature:

Date:

**PLEASE NOTE:** QLDC will send an invoice for the costs of interment directly to the "next of kin" named above, unless otherwise stated. Payment must be made **BEFORE** a burial is confirmed.

## 11 BILLING DETAILS (IF DIFFERENT FROM ABOVE)

Mr

Mrs

Ms

Miss

Surname:

Forename/s:

Billing Address:

Phone:

Mobile:

Relationship to Deceased:

Email:

Signature:

Date:

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**PRIVACY STATEMENT:**

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Queenstown Lakes District Council will use personal information for the purposes for which it was collected, or as otherwise authorised by the Privacy Act 1993 or any other legislation. The Council will share personal information with the Council's contractors and agents for the purposes of complying with the Council's obligations, and carrying out its functions under the Burial and Cremation Act 1964. In all other cases the Council will not share personal information with any third parties unless written permission is given by next of kin, or unless authorised by the Privacy Act 1993 or any other legislation.

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**OFFICE USE ONLY:****Charges:**

Plot Purchase	\$	<input type="text"/>
Excavation Fee	\$	<input type="text"/>
Maintenance	\$	<input type="text"/>
Oversize	\$	<input type="text"/>
Other	\$	<input type="text"/>

**Completed Forms:**

Authority to open a plot received

Yes  No Medical Certificate or  
Coroner's Authorisation receivedYes  No **Payment:**Charge to FD Charge next of kin