 **INTERMENT NOTICE - *BURIAL or NICHE WALL*** 

This form must be completed by the interment right holder *or* a person authorised to exercise the interment right in accordance with Section 35 of the *Burial and Cremation Act 2013* (see overleaf).

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| --- | --- |
| **DECEASED DETAILS:** | |
| Deceased’s Lease No: | Burial No from Register: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First Names: |  | | Last Name: | |
| Title: |  | | Gender: M / F | |
| Former Address: |  | | | Post Code: |
| Date of Birth: |  | Date of Death: | | Age: |
| The deceased person died of natural causes: Yes  No  | | | | |
| Authorisation for the Certificate of Identification  was issued by: | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **BURIAL / INTERMENT - INSTRUCTION DETAILS:** | | | |
| Date of Burial: |  | | |
| Time of Burial: |  | | |
| Graveside Service: Yes  No  | | | Special Request: |
| Coffin/Casket Size in mm: *(length) x (width)* | | | |
| Coffin Type (Casket / Coffin etc.): | | | |
| Interment Depth: | | Standard depth Extra depth  | |
| Re-open: Yes  No   If Yes, Name of Person(s) Currently Buried: | | | |

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| --- | --- | --- | --- | --- |
| **CEMETERY LOCATION DETAILS:** | | | | |
| Cemetery Name: | |  | | |
| Section: |  | | Row: | Grave No : |

|  |  |  |  |
| --- | --- | --- | --- |
| Niche Wall: | Wall: | Side: | Number: |

|  |  |  |
| --- | --- | --- |
| **INTERMENT RIGHT / LEASE:** | | |
| Council to issue New Interment Right for a new site? Yes   *If yes, please complete the Application for New Interment Right and return to council with this form.*  **OR**  Interment Right / Lease already exists? Yes  | | |
| Interment Right / Lease Number: | | Lease Expiry Date: |
| Interment Right / Lease Holder(s) Name: | | |
| Interment Right / Lease Holder Current Address: | | |
| Relationship to Deceased: | | |
| Existing Interment at Site: Yes No | | |
| Extension of Lease required: Yes No | # of Years to be extended: | |

|  |  |  |  |
| --- | --- | --- | --- |
| **FUNERAL DIRECTOR DETAILS:** | | | |
| Company Name: | | | |
| Name of Officiating Minister: | | | |
| Postal Address: | | | |
| Phone: | Fax: | Mobile: | |
| 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. Furthermore, I hereby authorise for the above burial interment to take place. Please forward any accounts for burial charges and any associated Interment Right (Lease) fees to me at the above address.  **Signature**: ………………………………………………………………….. **Date**: ……………………………………. | | | |
| Copies of documentation which meet the requirements of section 12.2 of the Burial and Cremation Act 2013 and Regulation 9 must be provided (siting and recording of certificate or authorization). | | | Attached …… Yes …… No |

# Your rights and responsibilities:

# New interment right

* If a new interment right is being requested in order to facilitate this burial, the Authorised Person will become the interment right holder.
* In signing this Burial Authority, the Authorised Person acknowledges receipt of a Statement by the Funeral Director if a new interment is required.
* An interment rights will only be granted to one interment right holder.

# Authority to exercise the interment right

* Only the interment right holder may exercise an interment right, provided that if the interment right holder is deceased the interment right may be exercised by the person representative of the deceased interment right holder (by definition the Executor or Administrator of the Deceased Estate) in accordance with section 35 of the *Burial and Cremation Act 2013*.
* If there is no personal representative the interment right may be exercised in accordance with regulation 32 of the

*Burial and Cremation Regulations 2014* as follows:

* + by the spouse of domestic partner of the deceased interment right holder; or
  + if there is no surviving spouse or domestic partner – by the eldest living relative of the deceased interment right holder in the following descending order of priority:
    - a child;
    - a grandchild or great-grandchild;
    - a brother or sister;
    - a parent;
    - a grandparent;
    - an aunt or uncle;
    - a nephew or niece;
    - a cousin;
    - any other blood relative

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**Account Dissection (Office Only):**

Lease fee (if app.) $ …………………………. Map ………

Grave digging $ …………………………. Book Reg. ………

Extra depth $ …………………………. Lease Reg. ………

Other charges (please $ …………………………. Plaque ordered ………

Specify, eg slab, weekend Account sent ………

Signed per …………………………………………………. Curator Inv No ………………………