

APPLICATION TO CARRY OUT MONUMENTAL/ RESTORATION WORK IN CEMETERY

APPLICANT:

Company Name:

Address:

Contact Person: **Phone:**

I, wish to erect/restore/carry out maintenance on
(Type of monument etc.)

to the memory ofwhose grave is located in
(Name of Deceased)

the Cemetery, on behalf of
(Name of Cemetery) (Client's Name)

in accordance with drawings, inscriptions and specifications submitted with this application.

Signature: **Date:**

DETAILS OF GRAVE

Size: **Section:** **Row:** **Plot** **No:**

Note: If insufficient space is provided, please use back of this form.

WORK TO BE PERFORMED (Please ✓ appropriate box and attach relevant information/fee.)

Monumental Work – Please attach:

- Application Fee required to be paid prior to any works.
- Drawing of proposed work.
- Wording and any design incorporated in proposed inscription.
- Specification of excavation, foundations and materials to be used.
- Certificates of Currency for Public Liability, Workers Compensation and Motor Vehicle Insurance Policies.
- Copies of OH&S White Cards.
- Copy of Company Licence.

Grave Cleaning/Painting (No Fee)