25/26 **CM01**

Application for interment into grave or mausoleum site

For all applications, you must:

- complete the form; •
- complete any other forms relevant to your application;
- provide any mandatory supporting information identified on the forms as being required to accompany your application; and
- submit the applicable fee.

LOCATION	MOSSMAN CEMETERY	PORT DOUGLAS CEMETERY		
	Lawn Plaque	□ Northern		
	Beam Headstone	Central		
	Monumental Section	□ Southern		
Burial Assistance Yes* No *Memorials not permitted on burial assistance plots				
ROW: PLOT:	Prepare plot for double interment:	Yes No		
Additional ashes for inurnment: Yes* No If yes, Name: Relationship:				
*If yes, please complete form CM03 Ashes inurnment into existing grave and lodge with this application				
SECTION 1 - SERVICE DETAILS				
Service will be held: Graveside	Church Name of Church	Church:		
Date & Time of Service: /	/ : am/pm Arrival tin	ne at cemetery: : am/pm		
Officiating Clergy/Celebrant:				
Coffin or Casket dimensions:	mm(L)	mm(W) mm(H)		
Does the family request a culturally sensitive burial service? If yes, please tick what is requested:				
Hand lowering of coffin: \Box	Hand backfill of plot: Partial ba	ckfill 🔲 Full backfill 🗌		
Please note these requests will depe	end on conditions on the day			
SECTION 2 - DECEASED DETAILS				
Family Name:	Given Name/s:			
Address:				
Date of Birth:	Date of Death:	Age:		
Male: Female:	Maiden Name:			
Also Known As:	Religion:			
Place of Birth:	Place of Death:			
Mother's Name:	Father's Name:			
Spouse's Name:	Occupation:			
Cause of Death:	Issuing Doctor:			
Are additional reservations required? Yes No (If yes please complete reservation application)				
OFFICE USE ONLY				
Fee: \$	T200: Mossman Cemetery	T201: Port Douglas Cemetery		
Receipt Number:	Received Date:	CSO:		

SECTION 3 - NEXT OF KIN DETAILS			
Name:	Relationship to	Relationship to owner:	
Address:			
Contact Number/s:	Mobile:		
SECTION 4 - NEXT OF KIN DETAILS			
Name:	Relationship to	Relationship to owner:	
Address:			
Contact Number/s:	Mobile:		
SECTION 5 - UNDERTAKER DETAILS			
Name of Undertaker:	Email:		
Representatives Name:	Phone:	Phone:	
Signature:		Date:	
personal information held by us. The way in which the collecting your personal information in accordance with the second	ne council manages personal information is gove ith the <i>Local Government Act 2009</i> so that we ca Council unless we are required to do so by la	vities, functions and duties. We respect the privacy of the erned by <i>the Information Privacy Act 2009</i> (Qld). We are an assess and finalise your application. Generally, we will aw, or unless you have given us your consent to such Information Privacy Policy.	
INTERMENT FEES			
Interment fee Adult Section (plot reser	ved) \$	\$1,444.05	
Interment fee Ashes	Ş	\$ 296.50	
Gravesite & Interment fee	ç	\$2,603.50	
Gravesite & Interment fee in Children's	Section \$	\$1,283.00	
Interment fee Children's Section (infan *No gravesite charge for children under Plaque costs are additional to intermer MAUSOLEUM FEES	r the age of 1 year in children's sec	5 626.00 tion, only interment fee applies.	
Entombment fee*	¢	5 766.00	
	For an application to erect a private of plots taken up by the structure. n. It is the applicant's responsibility	e mausoleum at Mossman Cemetery, the A building approval will be required / to obtain advice regarding building	
OFFICE USE ONLY			
Ganger notified: \Box Yes \Box No	Plot allocated:	□Yes □No	
Nautilus Aviation notified and service tin Confirmed by: Email: <u>reservations@nautilusaviation.cc</u>	Date: om.au and <u>flights@nautilusaviation</u>	Phone: 07 4034 9000 .com.au	
Invoice No:	Date:		
BDM Registration Legislative requirement	for burial to be registered within 7 day	S	
Date Registered:	Reference Number:	Officer:	