## Application for Reservation of Cemetery 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 Pl	aque	Northern		
	🗌 🛛 Beam H	eadstone	Central		
	🗌 Monum	ental Section	Southern		
	Memori	al Garden	Memorial Garden		
COLUMBARIUM WALL (Mossman Cemetery Only):					
	-	ry date of tentative reservatio	n:		
SECTION 1 - RESERV	ATION DETAILS				
Family Name:		Given Name/s:			
Residential Address:					
Postal Address:					
Contact Number/s:	Home:	Mobile:			
Date of Birth:		Email:			
SECTION 2 - APPLICA	NT'S/UNDERTAKER'S DET	AILS (If making reservation on	behalf of reservee)		
Name/Company:					
Address:					
Email:					
Contact Number/s:		Mobile:			
OFFICE USE ONLY					
Fee: <b>\$</b>	T200: N	Nossman Cemetery	T201: Port Douglas Cemetery		

**Receipt Number:** 

CSO:

**Received Date:** 

SECTION 2 - NEXT OF KIN				
Family Name:	Given Name/s:			
Relationship:	Email:			
Address:				
Contact Number/s: Home:	Mobile:			
Family Name:	Given Name/s:			
Relationship:	Email:			
Address:				
Contact Number/s: Home:	Mobile:			
IMPORTANT INFORMATION				

Your tentative reservation will be held for a period of three (3) months from the date of your enquiry. This date will be handwritten on the front page of this form by the customer service officer **or** advised to you via email with this form. Should you wish to permanently retain the reservation, please lodge this completed application form together with full payment prior to the expiry date of the tentative reservation. Note that once a tentative reservation has expired, a second tentative reservation cannot be made. Interment fees are paid at the time of need.

**RESERVATION FEES -** Purchase of plot/niche (interment fee paid at time of burial)

Gravesite	\$1,159.00	
Columbarium Wall – Single Niche	\$ 212.00	
Columbarium Wall – Double Niche	\$ 425.00	
Memorial Garden	\$ 301.00	

## DECLARATION

I \_\_\_\_\_\_ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.

Signature: Date:
------------------

## Douglas Shire Council – Privacy Collection Notice:

Douglas Shire Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which the council manages personal information is governed by *the Information Privacy Act 2009* (Qld). We are collecting your personal information in accordance with the *Local Government Act 2009* so that we can assess and finalise your application. Generally, we will not disclose your personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our Information Privacy Policy.

OFFICE USE			
CSO:	Date:		
Certificate Issued	Cemetery/Checklist Register		
Map Updated	Plot allocated:		