


**REGIONAL COUNCIL OF GOYDER**

	<b>REGIONAL COUNCIL OF GOYDER</b> <b>APPLICATION FOR RIGHT OF INTERMENT</b>	File:	16.16.3.....
		Record:	
		Version No:	2.0
		Adopted:	1/07/2022
		Issued:	1/07/2022
		Next Review:	
Responsibility:		Works Manager	

**DETAILS OF APPLICANT** Date \_\_\_/\_\_\_/\_\_\_

SURNAME \_\_\_\_\_ CHRISTIAN NAMES \_\_\_\_\_

ADDRESS \_\_\_\_\_

CONTACT (H) \_\_\_\_\_ (M) \_\_\_\_\_

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**CEMETERY LOCATION:** \_\_\_\_\_

**DETAILS OF PLOT:**

SECTION No. \_\_\_\_\_ ROW No. \_\_\_\_\_ PLOT (OR NICHE) No. \_\_\_\_\_ DURATION: PERPETUAL

OTHER COMMENTS \_\_\_\_\_

**PAYMENT DETAILS**

**FEES FOR INTERMENT RIGHT OF PLOT \$500**

**FEES FOR INTERMENT RIGHT OF NICHE MEMORIAL \$250**

PAYING CASH

PLEASE TAKE PAYMENT OVER THE PHONE

ADDRESS INVOICE/ RECEIPT TO BE SENT (IF DIFFERENT TO ABOVE)

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**ACKNOWLEDGEMENT**

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SIGNATURE OF APPLICANT ...../...../.....

DATE

**OFFICE USE ONLY - REGISTRATION OF PERMIT**

Updated - Cemetery Plan  Register Index  Register Record  Synergy

Invoice – Number .....