## All Correspondence to:

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INTERMENT ORDER	GF/16.16.3

	DATE OF ORDER:					
CEMETERY LOCAT						
Millicent T	antanoola Rendelsham Penola Kalangadoo Beachport Furner					
DECEASED DETAILS						
Title: Dr Mr Ms Mrs Miss						
Given Name/s	Last Name					
Date of Birth	Date of Death Age					
Last Known Addres	SS					
INTERMENT DETA	ILS					
Day of Interment	DateTime					
ETA at Cemetery prior to service						
Type of Service:						
Special Requests						
Person/Minister Officiating						
Name of Funeral Director						
GRAVE TYPE						
Interment Type:	☐ Wall ☐ Grave					
Grave Type:	☐ Cremation Urn ☐ Standard Coffin ☐ Couch Coffin ☐ Oversized Coffin					
Grave Depth:	Standard (2150cm) Triple (2650cm) Re-opening					
INTERMENT LOCATION (Please select one option ONLY)						
☐ New location						
(Please Note – A Burial and Memorial Sites Interment Rights and Responsibilities Statement nominating the Interment Right Holder/s must be completed and provided to Council with the Interment Order).						
Existing location: Details of existing grave/site						
Details of person/s interred						

## INTERMENT RIGHT HOLDER/S – NOTE: This section is only required when an existing location is to be used.

(An Interment Right Holder is the person/s nominated to decide and advise the Council about who may be buried, have ashes placed or be memorialised in a particular site).

Name of Interment Right	Holder/s					
Transfer of right required (Up to 2 people may be named as Interment Right Holders)						
DETAILS OF NEW RIGHT I	HOLDER/S					
Name		Name				
Address		Address				
		Phone				
DETAILS OF PERSON LEG	ALLY RESPONSIBLE FOR PAYME	ENT OF ALL BURIAL FEES AND	CHARGES			
Full Name						
Address						
Suburb	State	Postcode				
Phone	Email					
DETAILS OF PERSON PLA	CING INTERMENT ORDER					
Full Name						
Address						
Suburb	State	Postco	ode			
Phone	Email					
ADDITIONAL INFORMATI	ON/NOTES					
OFFICE USE ONLY						
Burial No.	Debtor No	Invoice No Am	ount \$			