

Application for Burial – Land Other than Council Cemetery

Application for permission to inter bodily remains on land other than a Council cemetery pursuant to section 8(2) of the Burial and Cremation Act 2013

Applicant/Authorised Person (personal representative or relative of the deceased)	
Name:	
Postal address:	
Phone number:	
Email:	
Relationship to the deceased person (provide proof):	

Interment Location and Details		
Address of property:		
GPS coordinates of interment site:	Latitude:	Longitude:
Description of the interment site:		
Interment depth:		

Landowner Details	
Name:	
Postal address:	
Phone number:	
Email:	
Relationship to the deceased person (if any):	

CD:	Classification:	Position Responsible:	Date Adopted:	Review Due
398	Public	Director Corporate Services	2 Apr 2026	Apr 2030

Details of Deceased			
Full legal name:			
Address:			
Date of death:			
Age:		Gender:	Male: ☐ Female: ☐
The deceased person died of natural causes:		Yes: ☐ No: ☐	
Certificate of Identification (Form 7) certified by (name):			

Funeral Company Details			
Company:		Name:	
Telephone:		Email:	
Interment date:		Interment time:	

For the application to be assessed, the following documents must be attached:

- ☐ Evidence the Applicant is the personal representative or relative of the deceased
- ☐ Written approval of the owner of the land on which the burial is to occur
- ☐ Plan/map of the property detailing the burial site (including GPS coordinates) and surrounding structures.
- ☐ A copy of the Certificate of Title for the land on which the burial is to occur
- ☐ Written consent of anyone with an interest in the land on which the burial is to occur (i.e. mortgagee or easement holder)
- ☐ A copy of the death certificate (or if not available, Doctor's Certificate of Cause of Death and Partial Certificate of Cause of Death)

Acknowledgement			
In making this application, I acknowledge that I have read and understood my rights and responsibilities and declare that I am a person authorised to exercise the interment in accordance with the <i>Burial and Cremation Act 2013</i> and the <i>Burial and Cremation Regulations 2014</i> .			
Applicant's signature			
Name:			
Signature:		Date:	

Council Authorisation			
Permit approved:	☐ Yes	☐ No	
Permit fee \$:			
Name			
Position			
Signature		Date:	

CD:	Classification:	Position Responsible:	Date Adopted:	Review Due
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