

RESERVATION REQUEST FORM

 ${\it Please ensure the correct spelling of all names included in this form.}$

Information Privacy Act 2009 – Mareeba Shire Council is collecting your personal information to process this interment request.

The information will be accessed only by authorised Council employees. Your information will not be given to any other person or agency unless you have given us permission, or we are required by law to do so.

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	To	o: Mareeba	Shire Counc	il Phone:	1300 308 461 Fax: 07 409	2 3323 Email: Cen	neteries@	msc.qld.gov.au	
MSC Application no:					MSC Doc set ID no:				
Informatio	n about the	APPLICANT							
Mr	Mrs	M:	s	Other	Family Name:				
Male Female			Given Names:						
					Residential Address:				
Date of Bir	th:				_				
Landline Ph	ո։								
Mobile Ph:					Mailing Address (if different from above):				
WIODIIC I II.					1				
Email:									
	n about the		checked the	n vou do	not need to complete detai	ls in this section)			
Jame a.	Applicant	IT CITIS DOX 13	CHECKEU THE	ii you uo	The theed to complete detail	13 111 11113 300110111			
Mr	Mrs	Ms	Other		Family Name:				
Male Female			Given Names:						
					Residential Address:				
Date of Birth:					-				
Landline Ph:									
					Mailing Address (if different from above):				
Mobile Ph:									
Email:									
					SONAL REPRESENTATIVE				
Same as	s Applicant (i	this box is	checked the	n you do	not need to complete detai	ls in this section)			
Mr	Mrs	Ms	Other		ranny Name.				
Mala	- Frank			Given Names:					
iviale	Male Female			Residential Address:					
Date of Birth:									
Landline Ph	n:								
Editable 111.				Mailing Address (if different from above):					
Mobile Ph:				_					
Email:									
CEMETERY	LOCATION	-			_				
Almaden		Chillagoe			Dimbulah			Kuranda	
Mareeba New		Mareeba Old		Mt Carbine	Mt Molloy		Watsonville		
SITE ALLOC	ATION								
New Site (all cemeteries)					Beside the grave of:		Near	the grave of:	
Mareeba New only				_					
0.1			-						
Catholic		Protest	tant						
Muclim		Angolic	Post						

RESERVATION REQUEST FORM (Continued)												
MSC – INTERNAL USE ONLY												
MSC Application no:		MSC Doc set ID no:										
Reservee Name:												
Cemetery:												
Section:												
Side:	Row:	Row:		Plot:								
CEMETERY SECTION												
Full Grave Slab (with headstone)	Lawn – P	Lawn – Plaque on Beam		Mausoleum (free standing)								
Single Niche (Columbarium Wall)	Vault bel	ow ground	Mausoleur	Mausoleum Wall								
Double Niche (Columbarium Wall)	Vault abo	ove ground	Headstone	Headstone on Beam								
FUNERAL DIRECTOR/PERSON ARRANGING THE RESERVATION												
Company Name:												
Contact Name:		Phone Number:										
		Email:										
Signature:		Date:										
Contact the Customer Service Officers, Mareeba Shire Council (1300 308 461) immediately after this Reservation Request Form has been submitted. A Reservation is not confirmed until a response is received from Council.												
MAREEBA SHIRE COUNCIL – INTERNAL USE ONLY	1		•									
Certification	Council Offic	Council Officer (Name) Sig		Date								
Physical certification of Plot Allocation (to be conby Parks and Gardens personnel)	mpleted			/ /								
I certify that the allocated Plot Number has been physically checked for availability.				/ /								
Certification of Plot Allocation against Council re (to be completed by Customer Service Officer)	ecords			/ /								
I certify that the allocated Plot Number has been against Council records and that there is no conflidata for the assigned plot.				1 1								
Receipt Number:	Amount Paid:	Paid:		Date Paid:								