

APPLICATION FOR A PRIVATE LAND INTERMENT

Privacy Statement - Council is collecting your personal information for the purposes of processing your application. Your information will be handled in accordance with requirements under the Information Privacy Act 2009 (Qld) and will not be used for any other purpose and will not be provided to any other entity without your express permission or unless required by law.

- Please read the MSC Cemetery Terms and Conditions and MSC Fees and Charges prior to completing this form.
- Please ensure that all names are spelt correctly in this form.
- Contact Council by phone 1300 308 461 before completing this application.
- Submit completed application by email: <u>cemeteries@msc.qld.gov.au</u>
- Decisions on private land interment applications can take up to three (3) weeks.
- Approval of the interment is not confirmed until you receive a written response from Council.

MSC INTERNAL USE ONLY

MSC Application No:

MSC Doc Set ID No:

Informa	Information about the APPLICANT							
	The applicant must be next of kin, personal representative of the deceased. You may be required to provide proof of your identity and evidence of your authority to make this application.							
identity	and evid	ence of y	our auth	nority to m	ake this a	pplication.		
Relationship to the deceased:								
Title:	Family		Family I	Name:		Given Name:		
Date of	Birth:					Phone / Mobile:		
Residential Address:								
Mailing	Mailing Address (if different from above):							
Email A	ddress:							

Information about the DECEASED (person to be interred)											
Title:			Family	Name:			Given N	ame:			
Date o	of Birth:			Date of	Death:		Sex:	٠	Male	٠	Female
Reside	ntial Addı	ress:									

Description of INTERMENT SITE		
Property Location including Lot and Plan Number:		
Global Positioning System (GPS Coordinates X & Y) of the interment site:	X:	Y:
	For example: X: 145.42	2501°E; Y: 16.99680°S
Is there an existing interment • No • Yes, please provide details	of who is already	
on the property? interred on the property:		
Will the deceased be interred	uent interment in existing	g site
in a new or existing site?		

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Descrip	otion of SPECIAL	HISTORIC or CUL	TURAL ASSOCIATION betwee	n the DECEASED	and the INTERMENT SITE / LAND	
		tion may be attacl				
LANDO	LANDOWNERS DETAILS					
• Sai	me as Applicant	(if this box is chec	ked then you do not need to a	complete details	in this section)	
Title:		Family Name:		Given Name:		

Phone /	/ Mobile:						
Resider	tial Addres	ss:					
Mailing	Mailing Address (if different from above):						
Email A	ddress:						
• Ale	• A letter from the Landowner providing permission for interment must be attached to this form (tick if attached).						

Information about the INTERMENT							
Interment Date:		Interment Day:		Start Time of Service or Graveside Ceremony:			

FUNERAL DIRECTO	R / PERSON ARRANGING THE INTERMENT		
Company Name:			
Contact Name:		Phone / Mobile:	
Email Address:			

Please list any SUPPORTING DOCUMENTATION		

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APPLICANT DECLARATION &	& SIGNATURE	
complete, true and correct. Subordinate Local Law No.1	I make this application under Mareeba S	. The information that I have supplied in this application i. Shire Council Local Law No. 1 (Administration) 2018, nt Act 2009 and Local Government Regulation 2012 to
Name:	Signature:	Date:
activity under Mareeba Shir		
Name:	Signature:	Date:
qualified and prepared to co Mareeba Shire Council Loca	on that I have supplied in this application arry out the interment. I understand that	is complete, true and correct. I am appropriately t interments on private land are a prescribed activity unde rdinate Local Law No.1 (Administration) 2018, Local
Name:	Signature:	Date:
MAREEBA SHIRE COUNCIL	INTERNAL USE ONLY	
Deceased Name:		

Receipt Number:		Amount Paid:		Date Paid:		
Interment Date:	Day:		Start time of the Servio			
Interment Site:						