|  |  |
| --- | --- |
| **Application for Right to Burial** | **NOTE:**   1. The application must be lodged with Canberra Memorial Parks before a burial can take place 2. All questions must be answered fully 3. All information is strictly confidential – please refer to our Privacy Policy available on our website |

**How to complete the form**

1. Part A, Part B and Part C must be completed by the applicant of the Right to Burial
2. Part D must be completed by Canberra Memorial Parks

**Part A: Applicant Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname |  | | |
| Other names |  | | |
| Address |  | Postcode |  |
| Phone |  |
| Email |  | | |

**Part B: Right to Burial – section 8**

**Application for burial in a new allotment** *(complete if applying for burial in a new allotment)*

|  |  |
| --- | --- |
| Cemetery |  |
| Allotment Type (eg. lawn, headstone) |  |
| Denomination (if any) |  |

**OR**

**Application for burial in an existing grave** *(complete if applying to re-open an existing grave)*

I am a descendant of the existing right holder (Please provide particulars and details of existing grave below)

|  |
| --- |
|  |

**AND**

**Is the grave permitted to be used for other burials of family members in the future?** *(complete if applying for burial in a new allotment* ***OR*** *burial in an existing grave)*

**YES**  **NO**

|  |
| --- |
|  |

**Part C: Applicant Signature**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of Applicant** |  | **Date** |  |
| **Signature of Witness** |  | **Date** |  |
| **Name of Witness** |  | | |

**Part D: Office Use Only**

|  |  |
| --- | --- |
| **Portion Number** |  |
| **Section Number** |  |
| **Block/Row Number** |  |
| **Allotment Number** |  |

Right to Burial Certificate (issued **OR** verified)

Database and maps updated

|  |  |
| --- | --- |
| **Signature** |  |
| **Name** |  |
| **Date** |  |