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| **Purpose of this Application Form** |
| Any person can use this form to seek a copy of an entry in a cemetery operator’s register. This application must be accompanied by the appropriate fee as set by the cemetery operator.Form approved by Cemeteries & Crematoria NSW under subsection 63(11) of the *Cemeteries and Crematoria Act 2013*.There is a separate obligation on cemetery operator’s to make the cemetery operator’s register available for public inspection free of charge, under subsection 63(7) of the *Cemeteries and Crematoria Act 2013*. |

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| Applicant’s Details |
| **Give Name(s)** |       | **Surname** |       |
| **Postal Address** | **Street or PO Box** |       |
|  | **Suburb** |       | **State** |     | **Postcode** |      |
| **Contact details** | **Home Phone** |       | **Mobile** |       | **Work Phone** |       |
|  | **Email** |       |

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| **Information Sought** |
|[ ]  **Information about use of a particular site or area within the cemetery** |
|[ ]  **Information about a particular deceased person** |
|[ ]  **Other, please specify below** |
|  |       |

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| Information the Applicant Has |
| **Please enter information regarding the site or area within the cemetery** |
|       |
| **Information about the deceased** |
| **Given Name(s)** |       | **Surname** |       |
| **Last address before death** | **Street** |       |
| **Suburb** |       | **State** |     | **Postcode** |       |
| **Date of Death (if known)** |       |
| **Date of Interment (if known)** |       |
| **Faith or Religion (if known)** |       |
| **Application is for details of** | [ ]  **an interment right** | [ ]  **a memorial** | [ ]  **both (interment right and memorial)** |
| **Please outline any other relevant information below** |
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| Proof of Identity of Applicant |
| Applicants must produce a copy of one of the following: driver’s licence issued by an Australian state or territory; identification page from a valid passport; citizenship certificate; credit card; identification card issued by an employer; identification card issued by the Commonwealth or state or territory government; copy of birth certificate. |

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| Applicant’s Signature |
| **Signature** |  | **Date** |       |