Application for Compensation Resulting from Revocation



Purpose of this Application Form

Holder(s) of a perpetual right that has been revoked by a cemetery operator can use this application form to seek compensation. The former holder is entitled to:

- a perpetual interment right granted for an alternative interment site in the same cemetery, or
- compensation paid by the cemetery operator of an amount equal to half of the fee payable for the granting of a perpetual interment right for an alternative interment site in the same cemetery (see section 52 of the Cemeteries and Crematoria Act

Form approved by Cemeteries & Crematoria NSW under subsection 53(6) of the Cemeteries and Crematoria Act 2013.

| Registered Holder(s) of Interment Right(s) | | | | | | | | | | |
|--|------------------------------------|--|--|---------|-------|------------|----------|----------|--|--|
| Holder 1 | | | | | | | | | | |
| Give Name(s) | | | | Surname | | | | | | |
| Postal Address | | Street or PO Box | | | | | | | | |
| | | Suburb | | | | State | | Postcode | | |
| Contact Details | | Home Phone | | Mobile | | Work Phone | | | | |
| 1 | | Email | | | | | | | | |
| Holder 2 | | | | | | | | | | |
| Give Name(s) | | | | Surname | | | | | | |
| Postal Address | | Street or PO Box | | | | | | | | |
| | | Suburb | | | State | | Postcode | | | |
| Contact Details | | Home Phone | | Mobile | | Work Phone | | | | |
| | | Email | | | | | | | | |
| Please attach an additional sheet to register more than two holders. | | | | | | | | | | |
| Proof of Ownership | | | | | | | | | | |
| Attach a copy of at least one of the following documents | | | | | | | | | | |
| | Interment r | ment right certificate | | | | | | | | |
| | Copy of the | e grant of probate (where the right is inherited but has not been transferred) | | | | | | | | |
| | Copy of the | py of the grant of letters of administration (if no will exists or the estate is intestate) | | | | | | | | |
| | Proof of rel | oof of relationship to the interment right holder, if not otherwise through grant of probate | | | | | | | | |
| | Grant of letters of administration | | | | | | | | | |
| Proof of Identity | | | | | | | | | | |

Applicants must produce two original identification documents, one of which must provide photo identification. These may include a passport, license issued under Australian law (driver's licence or other government-issued licence), birth certificate/citizenship certificate, credit card, EFTPOS card, Medicare card, and membership to a registered club.

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| Name of Applicant (if different to the Registered Holder) | | | | | | | | | | | | |
|---|---|---|---------|---|--------|------|----------|---|--|--|--|--|
| Give Name(s) | | | Surname | | | | | | | | | |
| Postal Address | Street or PO Box | | | | | | | | | | | |
| | Suburb | | | | State | | Postcode | | | | | |
| Contact Details | Home Phone | | Mobile | | Work P | hone | | 1 | | | | |
| | Email | | | | | | | | | | | |
| Compensation Options | | | | | | | | | | | | |
| Please select a compensation option | | | | | | | | | | | | |
| | _ | | | | | | | | | | | |
| | compensation | , | | | | | | | | | | |
| Signature of Applicant or Interment Right Holder | | | | | | | | | | | | |
| Signature | | | | | Date | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Conditions | | | | | | | | | | | | |
| An application for compensation must be received by the cemetery operator within six years from the date the interment right | | | | | | | | | | | | |
| was revoked. | | | | | | | | | | | | |
| The cemetery operator may elect to either grant an alternative interment site or pay compensation. | | | | | | | | | | | | |
| If the former holder of the interment right is granted an alternate site, the interment right may be transferred to another person by the former holder ASTER a five year revised from the date on which it was granted. | | | | | | | | | | | | |
| by the former holder AFTER a five year period from the date on which it was granted. | | | | | | | | | | | | |
| Privacy Decla | | | | | | | | | | | | |
| | ected on this form is h ollected for a lawful pu | | • | | | | | | | | | |
| | • | | | • | _ | • | | | | | | |
| functions. Excep | accordance with the <i>Cemeteries and Crematoria Act 2013</i> . We will not collect any more information than is necessary to fulfil these functions. Except as necessary to carry out these functions, we will not disclose your personal information to anyone without your | | | | | | | | | | | |
| consent unless legally required to do so. We will take all reasonable steps to protect the security of any personal information held, be it stored in electronic or hard copy format. You may request access to your personal information held by us, except in the circumstances | | | | | | | | | | | | |
| set out in Part 2, Division 3 of the <i>Privacy and Personal Information Protection Act 1998</i> . | | | | | | | | | | | | |
| <u> </u> | | | | | | | | | | | | |
| Office Use Only: Compensation Entitlement | | | | | | | | | | | | |
| This section is competed by the cemetery operator | | | | | | | | | | | | |
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