

# Notice of interment


Use this form to request to conduct an interment.


## Request


- Cemetery**
- St Bartholomew's Cemetery
- Riverstone Cemetery

- This form**
1. Applicant details
  2. Interment Right details
  3. Interment information
  4. Terms and conditions
  5. Fees and payment

## Declarations and signatures

- Applicant**
- I have read the Terms and conditions.
- The information in this form is true and correct to the best of my knowledge.
-  \_\_\_\_\_ **Date**     /     /

- Funeral Coordinator**
- I have read the Terms and conditions.
- I have attached a copy of the Medical Notice of Death
- The information in this form is true and correct to the best of my knowledge.
-  \_\_\_\_\_ **Date**     /     /

- Grave Digger**  
(to be signed on site in the presence of a Council officer)
- I confirm that the interment site dimensions are \_\_\_\_\_ mm long by \_\_\_\_\_ mm wide and \_\_\_\_\_ mm deep, and as such comply with the *Public Health Regulations Act 2012* and are as set out at section 4 of this form.
-  \_\_\_\_\_ **Date**     /     /

For help and to return this form

 Civic Centre, 62 Flushcombe Rd, Blacktown PO Box 63, Blacktown NSW 2148 DX 8117 Blacktown  
 [www.blacktown.nsw.gov.au](http://www.blacktown.nsw.gov.au)  [council@blacktown.nsw.gov.au](mailto:council@blacktown.nsw.gov.au)  02 9839 6000  02 9831 1961

## 1 Applicant details

**Applicant name**

**Postal address**

**Contact details**

Phone	<input type="text"/>	Mobile	<input type="text"/>	Work	<input type="text"/>
Email	<input type="text"/>				

- Authority**  
(select one)
- I am the Interment Right holder
- I am the specific person or class of person authorised by the Interment Right holder to make this application.

## 2 Interment Right details (complete for relevant Cemetery only)

Please attach proof of purchase of the Interment Right, Burial licence or certificate issued by Blacktown City Council.

### St Bartholomew's Cemetery

**Location**     Section #      Plot #

### Riverstone Cemetery

**Location**     Section #      Area #      Row #      Plot #

**Denomination**  
(Riverstone only)

- Catholic
- Church of England
- Methodist
- Muslim, please select
- AAll      Ahmadiyya Anjuman Ishatt-I-Islam Inc
- AMAAI      Ahmadiyya Muslim Association
- RMCB      Riverstone Muslim Cemetery Board
- Non-sectarian
- Presbyterian

### 3 Interment information

#### Who is to be interred

Deceased's full name

Last address

Place of death

Date of death

/

/

Age

#### Type of interment

Is this the first interment at this location?

Yes

No

Burial of human remains

Coffin/casket dimensions: Length

mm Width

mm Depth

mm

Interment of ashes

Urn dimensions: Length

mm Width

mm Depth

mm

#### Service details

Date

/

/

Type

Church/Chapel

Graveside

Time

am / pm

Other

#### Funeral Coordinator (planner/director)

Name (company)

Postal address

Contact name

Contact phone

Email

#### Grave digger

Company name

Postal address

Contact name

Contact phone

Email

## 4 Terms and conditions

- 4.1 Department of Health approval is required for shrouded or shallow burials (clauses 63 and 64 of the *Public Health Regulations Act 2012*). The Internment Right holder(s) is responsible for the application process. A copy of the Department of Health's approval must be attached to this Notice of interment.
- 4.2 You may request, at the time of application, to inter cremated remains within a coffin/casket and at the same time as the burial of other human remains. This will require a separate application as we are required to keep a record of all interments, but is not subject to an additional fee.
- 4.3 The Interment Right holder(s) is responsible for the maintenance of individual graves.
- 4.4 A memorial to the deceased person may be erected upon the plot and existing memorials may be altered or removed but not without our prior written approval.
- 4.5 We reserve the right to refuse permission for any proposed memorial construction or alteration in our absolute discretion. We have the right (but not the obligation) to remove any unapproved memorial or alteration without notice.
- 4.6 Glass or other items that we deem to be a safety hazard are not permitted and if necessary may be removed without notice.
- 4.7 We reserve the right to review and/or amend these Terms and conditions, our holdings, interment plots and property within our cemeteries at any time, without notice.

## 5 Fees and payment

Fees are payable. Full payment must be received by us prior to interment. Additional fees may also be payable if the interment is outside of normal operating hours. Current prices are set out in our *Goods and Services Pricing Schedule*, available at [www.blacktown.nsw.gov.au](http://www.blacktown.nsw.gov.au) or on request. You can pay by:

- Cash You can only pay by cash in person at our Customer Service Centre
- Cheque Make out your cheque to: Blacktown City Council
- Credit card Complete details below (we destroy card details on receipt of payment)

If you are making payment and are not the holder(s), please provide your contact details below.

<b>Payer's name</b>		
<b>Address</b>		
<b>Phone</b>	<b>Email</b>	

### Privacy notice

We are collecting this information under the *Cemeteries and Crematoria Act 2013* to process your request and maintain a cemetery operator's register that is available for public inspection. We may not be able to process your request without it. We will store your personal information on our systems or in our offices, where it will be used by our staff and contractors. Other people can request access to it under the *Government Information (Public Access) Act 2009*. You can ask us to suppress your personal information from a public register and we will consider your request in line with the *Privacy and Personal Information Protection Act 1998*. Our *Privacy Management Plan* sets out how you can access or correct your personal information. Please visit [www.blacktown.nsw.gov.au](http://www.blacktown.nsw.gov.au) for a copy of the plan.

### Credit card payment details (this section will be removed on receipt of payment details)

<b>Please debit my</b>	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa card	<b>Amount</b>	\$										
<b>Cardholder name</b>														
<b>Card number</b>									<b>Expiry</b>			/		
<b>Cardholder signature</b>					<b>Date</b>			/		/				