

# Memorial Garden Suite Burial Licence and Burial Permit Application 2018/19



SECTION 1 - Plot Details (Memorial Garden Space)				
Cemetery:				
Memorial Garden Suite Number:				
Space Number:				
SECTION 2 - Burial Licence / Interment Details				
Please tick ONE of the following:				
<input type="checkbox"/> New Burial Licence (Immediate Use)				
<input type="checkbox"/> Reserved Space (1 <sup>st</sup> interment)				
SECTION 3 - Grantee / Executor / Authorised Representative				
Full name of Applicant:				Title:
Address:				
Suburb:			Postcode:	
Email:			Phone:	
Relationship to Deceased:				
SECTION 4 - Deceased Details				
Full name of the deceased:				Title:
Last Residential Address:				
Suburb:			Postcode:	
<input type="checkbox"/> Male <input type="checkbox"/> Female		Occupation:	Age:	
Date of Birth:		Date of Death:	Date of Interment:	
SECTION 5 - Location of Ashes				
<input type="checkbox"/> Funeral Director <input type="checkbox"/> Applicant <input type="checkbox"/> Other				
If the ashes are being held by the funeral director, crematorium or other; please provide details:				
Name:				
Address:				
Suburb:			Postcode:	
Email:		Phone:	Facsimile:	
Remainder Ashes: Please note, in some instances when ashes are required to be transferred into the Memorial Garden Suite ashes urn (cylindrical container) there can be remainder ashes. Please confirm your choice by ticking the box below to either retain the ashes or scatter in the cemetery gardens:				
<input type="checkbox"/> Retain Ashes for the Family				
<input type="checkbox"/> Scatter Ashes in Memorial Garden Suite				
Special Instructions:				
SECTION 6 - Memorial Plinth Details (Please see template for inscription details)				
Granite Colour	<input type="checkbox"/> Black	<input type="checkbox"/> Noble Grey	<input type="checkbox"/> Emerald Pearl	<input type="checkbox"/> Blue Pearl
Inscription Colour	<input type="checkbox"/> White	<input type="checkbox"/> Silver	<input type="checkbox"/> Gold (gold text incurs an additional fee \$155.00)	
Inclusion of Emblem	<input type="checkbox"/> Yes (inclusion of emblem incurs an additional fee \$120.00)			
Ceramic Photo Tile	<input type="checkbox"/> Yes (inclusion of ceramic photo tile incurs an additional fee \$120.00)			

**SECTION 7 - Applicant Signature**

I, the undersigned (please tick ONE box only):

- Am the person already registered as the Holder of the Burial Licence (Grantee)
- Am the person to be registered as the Holder of the new (immediate use) Burial Licence (Grantee)
- Propose to use an existing Burial Licence in the absence of (or acting on behalf of) the person registered as the Holder of the Burial Licence

**I understand that the Grantee has the sole authority to determine who can be interred in the Memorial Garden Suite space and to allow inscriptions on the memorial plinth to be installed on the ground of the Memorial Garden Suite.**

I state that all the information supplied is true and correct.

Signature (*Applicant*):

Date:

**SECTION 8 - Funeral Director Signature**

I, the above mentioned Funeral Director:

- Have advised the Applicant of the Cemetery Policy included with this application
- Have advised the Applicant that the Grantee has sole authority to determine who can be interred in the Memorial Garden Suite space and to allow inscriptions on the memorial plinth to be installed on the ground of the Memorial Garden Suite.

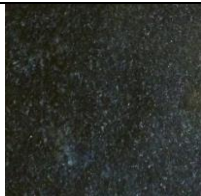
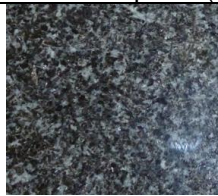
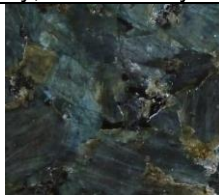

Signature (*Funeral Director*):

Date:

<b>Application Type</b> ( <i>please tick all that apply</i> )	<b>Please Tick</b>	<b>Office Use Only</b>
Memorial Garden Suite Wallsend: Burial Licence (\$695.00)	<input type="checkbox"/>	601032-8008-43600 (T29)
Memorial Garden Suite Wallsend: Burial Permit (\$795.00)	<input type="checkbox"/>	601032-8008-43601 (T29)
Memorial Garden Suite Wallsend : Extra Line Inscription (\$55.00)	<input type="checkbox"/>	601032-8008-43601 (T29)
Memorial Garden Suite Wallsend: Inclusion of Emblem (\$120.00)	<input type="checkbox"/>	601032-8008-43601 (T29)
Memorial Garden Suite Wallsend: Gold Text (\$155.00)	<input type="checkbox"/>	601032-8008-43601 (T29)

### Garden Suite Plinth Specifications

i. There are **four** choices of colours for the plinth (sample only, colours may vary)

			
<b>Black</b>	<b>Noble Grey</b>	<b>Emerald Pearl</b>	<b>Blue Pearl</b>

- ii. There are **three** choices of inscription / font colour, white, silver or gold. Gold text is at an **extra** cost.
- iii. Each plinth face measures 200mm x 150mm.
- iv. **Text over 8 lines is at an extra cost.** The plinth manufacturer can reduce or increase the size of the lettering depending on the amount of text required.
  - Please note that it can be very hard to read the plinth after placement when it is has a lot of text included.
- v. Inclusion of an emblem is an **extra** cost
  - Example: image of heart, flower motif etc, clipart jpg or downloadable image to be supplied.
  - Office of War Graves Approval must accompany War Veteran badge request (contact Office of War Graves, who can fax approval to Council).
  - Please include positioning of image on plinth (e.g. top, left, right, centre).
  - Please note that this will reduce the size on the plinth for text content.
- vi. Inclusion of a ceramic photo tile is an **extra** cost
  - Please note, ordering of photo tiles can hold-up the installation process as they are ordered separately and are often time delayed.
  - Inclusion of a photo will reduce the size on the plinth for text content – please provide computer image with resolution of 600dpi or higher.
- vii. Council, upon request will mail, fax, or post a ‘proof / bromide’ of the plinth as confirmation of details prior to ordering. Please see reverse of this form to fill in details.

### Examples of Epitaphs

God has her in his keeping We have her in our hearts	You will live in our hearts forever	Through our hearts we are undivided
The door of heaven opened wide and our beloved went inside	Beautiful memories are all we have left of one we loved and cannot forget	Sleep on dear one Take thy rest We miss you most Who loved you best
Have a safe journey	A precious one from us is gone A voice we loved is stilled	Will be greatly missed by all those whose lives she has touched
When we live in the hearts of those we love, we do not die	A place is vacant in our home Which never can be filled	You are the brightest star in the sky Forever shining in your memory
Forever he will be missed	Faith wings the soul beyond the sky Up to that better world on high	Your memory will be forever shining in the sky
Forever remembered	Beyond the beautiful sunset Free from sorrow or pain In gods garden of roses Where we will all meet again	There is no death. Only a change of Worlds
Someday, Sometime	Time goes on and still we miss you Never will your memory fade Loving thoughts are always with you and the place where you are laid	We live for a moment in time, but our lives have changed the world forever
Our eyes shall see The faces kept in memory		
God takes our loved ones from our homes But never from our hearts		
Will be sadly missed and forever in our hearts	You enjoyed the finer things in life consistently and to the end	

**IN LOVING MEMORY OF  
DAISY VIOLET GARDEN**

**12-5-1935 TO 20-3-2011**

**75 YEARS**

**BELOVED WIFE OF DAVID,  
LOVING MOTHER AND GRANDMOTHER  
FOREVER REMEMBERED**

• A dedication line *"In memory of"* *"In loving memory"* etc.

• Name of deceased.

• Birth, deceased dates and age details.

• General text detailing personal information from relatives / friends.

• Some families like to add another dedication at the bottom of the plinth *"In God's Care"*, *"Rest in Peace"*, *"Forever in our Hearts"*, etc.

• Placement of emblem / photo tile is normally positioned in the left or right corner of the plinth to allow for maximum text flow.

**SECTION 9 - Template for Garden Suite Plinth**

**Dedication** (if applicable)


**Name Details** (e.g. first name, middle name, surname)


**Inscription Details** (e.g. date of birth, date of death, age, general text)


**Contact Details**

**Garden Suite Details**

Name:	Memorial Garden Suite Number:
Signature:	Space Number:
Phone Number:	Granite Colour:
Fax Number (if applicable):	Inscription / Font Colour:
Email Address (if applicable):	

Please tick (applicable choice) if you would like to see copy of plinth before order:

- Fax                       Email                       Post

<b>Section 10 - Application Lodgement Checklist</b>				
Applicants should take some time after completing their application form to work through this checklist to ensure that the application has been fully completed.				
This information is essential for Newcastle City Council to make a full assessment of your application. If this information is not included, Council will not be able to assess your application.				
Please ensure your application is complete by ticking a box for each item. At the conclusion of this Section, if 'No' has been ticked for any item, your application is incomplete and will not be assessed.				
<b>Section 1 - Cemetery and Plot (Space) Details</b>	<b>YES</b>		<b>NO</b>	
Cemetery and Plot (Space) details complete				
<b>Section 2 - Burial Licence / Interment Details</b>	<b>YES</b>		<b>NO</b>	
Burial Licence/Interment details complete				
<b>Section 3 - Grantee / Executor / Authorised Representative</b>	<b>YES</b>		<b>NO</b>	
Grantee / Executor / Authorised Representative details complete				
<b>Section 4 - Deceased Details</b>	<b>YES</b>		<b>NO</b>	
Deceased details complete				
Copy of the Will, Application for letters of Administration or Statutory Declaration provided				
Copy of the Medical Cause of Death Certificate, Death Certificate or Coroner's Order provided				
<b>Section 5 - Location of ashes</b>	<b>YES</b>		<b>NO</b>	
Location of ashes complete				
<b>Section 6 - Memorial Plinth Details</b>	<b>YES</b>		<b>NO</b>	
Memorial plinth details complete				
<b>Section 7 - Applicant Signature</b>	<b>YES</b>		<b>NO</b>	
Relevant box ticked and form Signed by the Applicant				
<b>Section 8 - Funeral Director Signature</b>	<b>YES</b>		<b>NO</b>	
Both boxes ticked and form Signed by Funeral Director's Representative				
<b>Section 9 - Template for Garden Suite Plinth</b>	<b>YES</b>		<b>NO</b>	
Template for Garden Suite Plinth complete				

## CEMETERY POLICY

### General Conditions

- i. Interments will only be allowed if the relevant legislation including but not limited to the Public Health Regulation 2012 - Part 8, Work Health and Safety Act 2011, Heritage Act 1977, The City of Newcastle (Council) Work Health and Safety Management System requirements and the procedures of Council can be satisfied. It is the obligation of the Grantee or their agent (e.g. Funeral Director) of this application to ensure compliance.
- ii. Council is responsible for the maintenance and administration of the Niche Wall and Memorial Garden Suite and the memorials placed therein.
- iii. Interment / installation, placement and the supply of plaque / plinth is the responsibility of Council.
- iv. Council requires all agents who work within Council cemeteries to hold a valid Permit to Work in the Council Cemeteries prior to commencement of work.
- v. The City of Newcastle Cemeteries Policy shall apply.
- vi. Payment of all prescribed fees of the application must be made at the time of lodgement. No Burial Licence / Permit will be reserved or arrangement for the interment of the ash remains will be made until all charges prescribed at the date of interment have been paid.
- vii. The Medical Cause of Death Certificate must be attached with the Burial Permit Application.
- viii. Exclusive Burial Licences may be transferred, upon request to Council, and payment of the appropriate charge fixed by Council.

### Grounds of Authority

*The Applicant may propose to use an existing Burial Licence if;*

- i. The exclusive Burial Licence has been issued in the name of the Applicant; or
- ii. The person named on the exclusive Burial Licence is the deceased person to be interred and the Applicant is considered by Council to have had a sufficient relationship with the deceased person, Council may require a statutory declaration as proof of relationship; or
- iii. The Grantee has given written authority and the applicant has provided Council with a copy of that written authority that the Applicant may issue instructions to inter ash remains of the deceased in the Niche Wall or Memorial Garden Suite subject to the exclusive Burial Licence.

### Niche Wall and Memorial Garden Suites

- i. Council reserves the right to realign or alter the position of niches or other memorials at its discretion.
- ii. Council will not be liable for the repair, maintenance, upkeep or preservation of any plaque / plinth or item placed in the Niche Wall or Memorial Garden Suite.
- iii. Ash remains are held for interring into niches for 6 months; no responsibly is accepted for ash remains. Ash remains not placed in niches within 6 months may be disposed of in a manner determined by Council.
- iv. A person shall not construct or install any monument, memorial, inscription, token plant, floral tributes, containers or such like shall be erected or placed on or within the Niche Wall or Memorial Garden Suite without Council's written permission. Council may remove and / or dispose of any unauthorised monument, memorial etc without reference to any person.

### Council Shall:

- i. Maintain, preserve and repair Niche Walls and Memorial Garden Suites.
- ii. Ensure that no monument is erected on the Niche Wall other than the flat black granite wall plaque or in the Memorial Garden Suite, no monument is erected other than the granite plinths of the style and design allowed.
- iii. Supply and install in the Niche Wall and Memorial Garden Suite, as soon as practicable, upon receipt of written instructions from the Grantee, a memorial plaque / plinth of a standard size and type as determined by Council.

### Glossary of Terms

**Burial Licence:** an exclusive right granted by Council (or its predecessors) for use of a burial site, Niche Wall space or Memorial Garden Suite space. The holder of the exclusive Burial Licence has the sole authority to determine who can be interred / immured (buried) in the burial plot, Niche Wall or Memorial Garden Suite and to allow for the installation of memorials including headstones, inscriptions etc to be placed on the grave, Niche Wall or Memorial Garden Suite. The ownership of the land, wall, garden, or memorial boulder, remains with the Council.

**Applicant:** any person making application for an exclusive Burial Licence issued by Council pursuant to Councils Cemetery Policy.

**Grantee:** person/s granted an exclusive Burial Licence issued by Council pursuant to Councils Cemetery Policy – where there are two grantees; they shall be 'joint tenants'.

Cemetery	Location	Type of Cemetery
<b>Minmi</b>	Minmi Road, Minmi	Monumental
<b>Stockton</b>	Fullerton Street, Stockton	Monumental, Lawn, Niche Wall
<b>Wallsend</b>	Sandgate Road, Birmingham Gardens	Monumental, Lawn, Niche Wall and Garden Suite

### **Protecting your privacy**

The City of Newcastle is committed to protecting your privacy. We take reasonable steps to comply with relevant legislation and Council policy.

**Purpose:** Information required for Facilities and Recreation, Cemetery Records, Statutory requirement under the Public Health Regulation 2012- Part 8 and Cemeteries and Crematoria Act 2013.

**Intended recipients:** The information will form part of a public record that must be available for inspection under the Public Health Regulation 2012- Part 8.

**Supply:** Voluntary.

**Consequence of Non Provision:** Application not be processed.

**Storage and security:** The City of Newcastle Electronic Document Management System; records to be kept indefinitely.

**Access:** The City of Newcastle, phone 02 4974 2000, fax 02 4974 2222, email [mail@ncc.nsw.gov.au](mailto:mail@ncc.nsw.gov.au).