

## FORM Burial application

1.	Buria	al plot owner details								
	1a.	Full name								
	1b.	Address (please provide postcode)	First name(s)		Surnam	le				
	1c.	Relationship to the deceased								
	1d.	Contact details								
	1e.	Email address	Home phone	Work phone		Mobile				
2.	Fune	eral director details								
:	2a.	Funeral company								
:	2b.	Funeral director's name								
			First name(s)		Surnam	ne				
3.	Dece	eased details								
;	3a.	Full name								
	OIs.	First name(s) Surna				ne				
,	3b.	Last residence								
	3c.	Date of death				2 1				
		Occupation of		Age	)	Gender				
		deceased								
4. 1	Fees	and charges (effective	e 1 July 2023 - 30 Ju	ine 2024)						
	Plot	purchase				Cost				
	• • • •	Adult								
		+	des 8 standard ashes or	\$ 4,579.00 cd ashes only Mangapouri Cemetery) \$ 2,914.00						
		Child (under 14)				\$ 2,088.00				
		Ash plot				\$ 1,339.00				
		Returned Servicepersor are provided)	ctions	No charge						
	Interment fees									
		Adult/Returned Service								
		Child (under 14)		\$ 1,311.00						
		Stillborn				\$ 659.00				
	-	Ash burial		\$ 659.00 \$ 561.00						
	Othe	r charges								
		Weekend/public holiday	/public holiday surcharge (only applies to casket burials)			\$ 803.00				
	Total \$									
ı	Please provide details of the funeral director, solicitor or person responsible for the payment of fees:  Full name									
			First name(s)		Surnam	ne				
	Postal address									
							·			
OFFICE US	SE ON	NLY					lease turn over			
Date received		Applicant	#	Plans updated		Application #				
Time received		Invoice #		Memorial issued		Document #				

Full name	of deceased	First name(s)		Surna	ıme
5. Burial d	letails				
a) Booking d	letails				
Name of c	emetery				
Date and t of interme				Start time	Finish time
Type of bu	ırial	Casket	Ashes		
<b>b) Plot detai</b> l Select the plo	<b>ls</b> t requirements	for the burial:			
Pre-purcha	ased plot				
		been purchased at the rial is to occur, please			previously interred
Date of de	ath	First name(s)		Surnam	ne
Relationsh deceased	ip to the				
	r-specify details	plot is reserved s single plot/s.			
i wiii paron	1400	omgio pios oi			
	d graveside d				
	ation (head to t	the memorial)	Yes No		
Casket shape	Shape	ed Oblong			
Casket shape	isions (include	protruding handles in	the measurement	s):	
					mm G
	mm	C	G	i =	mm _ <del>L L</del> _
Casket dimen		E // -			
Casket dimen	mm	E A		i = I =	mm
Casket dimen A = B =	mm mm	E A B			
Casket dimen A = B = C =	mm mm mm	E A			mm
Casket dimen  A =  B =  C =  D =	mm mm mm mm	E A B			mm
Casket dimen  A =  B =  C =  D =  E =  F =	mm mm mm mm	E A B			mm
Casket dimen  A =  B =  C =  D =  E =  F =  Lowering dev	mm mm mm mm mm	E A B			mm
Casket dimen  A =  B =  C =  D =  E =  F =  Lowering dev	mm mm mm mm mm	Yes No			mm
Casket dimen  A = B = C = D = E = F = Lowering dev Lowering by h Grass mats re	mm mm mm mm mm ice required nand	Yes No			mm
Casket dimen  A = B = C = D = E =	mm mm mm mm mm ice required nand	Yes No			mm
Casket dimen  A = B = C = D = E = F = Lowering dev Lowering by h Grass mats re	mm mm mm mm mm ice required nand	Yes No			mm

## 6. Applicant's declaration

## **PRIVACY STATEMENT**

Information you provide in this application is required to process your application and ensure that burials occur in the correct plots and that accurate records are maintained for the future. New Plymouth District Council (NPDC) staff have direct access to this information. In appropriate circumstances, this information may be shared with those seeking detail/locations of deceased relatives and their descendants. The information requested is required under the Burial and Cremation Act 1964 and associated NPDC bylaw. Under the Privacy Act 2020, you have the right of access to personal information about you held by NPDC and you are entitled to request information about you to be corrected.

## **DECLARATION**

I confirm that I have read and understood the above privacy statement. I confirm that the information provided on the application form is true and correct. I agree that I will be responsible for, and indemnify NPDC in respect of the payment of all fees in connection with this application.

rst name(s)	Su	rname	
elationship to the deceased			
gnature		Date	

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