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APPLICATION FOR SINGLE FUNERAL PERMIT (Cemeteries Act 1986) BODDINGTON, MARRADONG OR QUINDANNING CEMETERIES

Name of Deceased:					
Name of Applicant (Funeral home)					
Address of Applicant (funeral home)					
Phone:	Email:				
LOCATION:					
Cemetery:	Area:	Section:	Grave No:		
Date and Time of Funeral:					
I hereby make an application for in support of such application I d That I have in my possessic a "Permit to Cremate".	declare as follows:				
 That in the event of a burial: (a) I am the holder of the Grant of Right of Burial for the grave; or (b) I shall produce to the Shire the written consent of the holder of the Grant of Right of Burial for me to exercise the Rights to bury the above named deceased person in the grave; or (c) That without either of the above I will be liable and I indemnify the Shire from expenses or damage resulting from the exercise of such Rights. 					
3. I will complete a Certificat	I will complete a Certificate of Identification. (Fifth Schedule)				
That the deceased will be enclosed in a substantial coffin bearing the name of the deceased stamped (or otherwise indelibly inscribed) in legible characters on a metal plate on the coffin lid.					
The casket will be obtained from)				
Casket dimensions are:	mm	ı x	mm		

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5.	That the vehicle used to transport the body and coffin within the cemetery is a suitable vehicle of the following description:				
	Make:Mod	del	Year		
6.	In the event of a permit being issued I vertices prescribed by the Shire.	will comply with all	Cemetery Local Laws and conditions		
7.	I agree to maintain Public Liability Insurance cover and Workers Compensation Insurance cover (where applicable) as a condition of my permit.				
	(Note: a copy of Certificate of Currency of Insurance to be submitted with this application)				
Signa	ture of Applicant:	Date:			
Appro	oved by:	Date:			