



APPLICATION FOR PLACEMENT OF ASHES INTO NICHE WALL OR A FAMILY GRAVE

Shire of Wickepin
PO Box 19 WICKEPIN WA 6370
Phone: 9888 1005 Fax: 9888 1074
Email: admin@wickepin.wa.gov.au

Deceased Details					
Full Name				Gender	
Address					
Date of Birth	/	/	Age	Date of Death	/ /
Occupation			Place of Death		
Originating Cemetery					
Cremation Reference				Cremation Date	/ /

Grant Details			
Grant #		Expiry Date	/ /
Name	Contact Details		
Address			
Signature			Date / /

A current Grant of Right of Burial is required to place ashes in an existing grave. Written authority of the Grant holder is required for the interment of ashes and a statutory declaration is required if the Grant holder is deceased. If a Grant has expired, a renewal fee may apply. Please contact the Shire of Wickepin for further information regarding the Grant of Right of Burial.

Placement Details	GRAVE			
Cemetery	<input type="checkbox"/> Wickepin	<input type="checkbox"/> Yealering	<input type="checkbox"/> Harrismith	<input type="checkbox"/> Toolibin
Grave Location	Section		Plot	
Other interment(s)				
Family to attend?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Location in grave	Head <input type="checkbox"/> Foot <input type="checkbox"/>	Other

Placement Details	NICHE WALL		
Cemetery	<input type="checkbox"/> Wickepin	<input type="checkbox"/> Yealering	<input type="checkbox"/> Harrismith
Size	Single only	Single / Double	Single / Double
Compartment			
Other interment(s)			
Family to attend?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Please contact Shire office to arrange details of Placement.	

Scattering of Ashes			
Cemetery	<input type="checkbox"/> Wickepin	<input type="checkbox"/> Yealering	<input type="checkbox"/> Toolibin
Location within Cemetery			
Family to attend?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Please contact Shire office to arrange details of Scattering.	

Applicant Details			
Name	Contact Details		
Address			
Relationship to Deceased			
Signature			Date / /

I hereby certify that I am the Applicant for this interment and have authority for the use of this grave.