

APPLICATION TO CARRY OUT MONUMENTAL WORK AT SEDFIELD AND JERRYS PLAINS CEMETERIES

Applicant Details

Permit Number : _____

Full Name : _____

Address: _____

Phone No: _____ Email: _____

Are you aware of anyone, who would dispute the works proposed to be carried out? Is there any dispute within the family? Yes / No

Relationship of applicant to deceased: _____

Monument Details

Name of Deceased: _____

Location to which the work will be restricted (Cemetery, Section, Row and Plot Number):

Description of the proposed work: _____

Please attach drawing detailing the work. Be sure to include specification for the monuments foundations.

Materials to be used: _____

Stonemason Details

Name: _____

Address: _____

If a stonemason is not to carry out the work, who will and what relative skills does that person possess to successfully complete the work? _____

Approval

Signed: _____ Date : _____

(The application must be made by the grantee or an agent authorised by the grantee)

Approved: _____

(Council Officer) Signature:

Name:

Date: ____/____/____ Approval Number: _____

Fee

Monumental Fee \$ _____ Date: _____

Total Cost \$ _____ Cost code: GL: 04156.0702.9006

Approval is subject to the conditions laid out in the Singleton Council's Operating Policy and Australian Standard AS4204-1994 headstones and cemetery monuments. Work not conforming to the conditions of the application may be removed without notice.

PLEASE NOTE: HEADSTONE MUST SIT BACK 200 MM FROM THE FRONT OF CONCRETE BEAM TO ALLOW MAINTENANCE OF GRAVE