Application for Interment Authorisation – Private Burial

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File no:

Date of Application

This form must be completed by the interment right holder
Notification must be given at least 3 days before the Burial

Section 1 – Details of the Deceased

Title | Given Name | Surname

Date of Birth | Birthplace | Date of Death | Age | Gender M ☐ F ☐

Last known residential address

Suburb | State | Post Code | Place of death

Section 2 – Interment Location (*please select one*)

A ☐ Council to allocate a new location (new interment right required)

B ☐ Family to select new location (new interment right required)
Family to contact Council and arrange a time to consider interment sites available

C ☐ Existing location (existing interment right)
Please complete below:

Name of Interment right holder | Interment Right No:

Location: Cemetery | Section | Row | Plot

Existing interments at Site ☐ Yes ☐ No Transfer of right required ☐

Section 3 – Interment Right Holder

Title | Given Name/s | Surname

Address

Suburb | State | Post Code | Relationship to Deceased

Telephone: Home | Work | Mobile

Email

I _____ (full name)

certify that I – *(please tick as appropriate)*

☐ am the person whose name the Interment right is issued
☐ am the personal representative of the holder of the Interment right
☐ have written authority of the person in whose name the interment right was issued

And I acknowledge that I have read and understood the Conditions of Interment Right below:

Signature | Date

District Council of Elliston PO Box 6 Beach Terrace Elliston SA 5670 Phone: 8687 9177 Email: dce@elliston.sa.gov.au Web: www.elliston.sa.gov.au

Interment Right Conditions

The conditions are related to issuing of an Interment Right in accordance with the Burial and Cremation Act 2013 and Burial and Cremation Regulations 2014.

1. The person/s named in the interment right application as the holder/s, is/are the Interment Right Holder/s, once this has been approved and the relevant fees have been paid. This person/s has/have the right to decide who is to be buried, or whose ashes will be placed (based on what was stated in the interment right application) in the cemetery that was nominated in the Interment Right application.

2. If the holder of an interment right has died, the interment right may be exercised or enforced by the deceased holder's personal representative (executor/s or administrator of the estate). If there is no personal representative, then according to the Burial and Cremations Regulations 2014 this right may be exercised;
   a) By the spouse or domestic partner of the deceased interment right holder or
   b) if there is no surviving spouse or domestic partner by the eldest living relative of the deceased interment right holder in the following descending order of priority: child, grandchild or great-grandchild, brother or sister, parent, grandparent, aunt or uncle, nephew or niece, cousin, any other blood relative.

3. The Interment right holder must obtain permission via writing from The District Council of Elliston to erect any structures or objects on the burial site subject of the interment right. Any structure or object erected thereon must comply with any applicable Council guidelines or Policy.

4. The Interment right holder acknowledges and agrees that the District Council of Elliston will not have any responsibility or liability for any loss or damage to any structures or objects erected on the burial site.

5. The interment right holder/s is/are the owner/s of the memorial/headstone in respect to the interment site where the memorial is situated. The interment right holder/s are therefore responsible for maintaining the headstones and memorials in a safe and proper condition. If the memorial becomes unsafe the Council has the power to require repair, removal or reinstatement of the unsafe memorial by the owner of the memorial.

6. The interment holder must comply with provisions in all Acts, regulations, by-laws and all directions and orders of the Council in relation to the interment holder's use of the burial site.

7. The interment holder may apply to the District Council of Elliston to inter additional remains in the burial plot. The District Council of Elliston may grant multiple interment rights with respect to a single burial site at its absolute discretion and subject to any conditions it considers appropriate (cost of these e.g. ashes interned in burial plot).

8. The interment right holder may surrender the interment right by notification in writing to the District Council of Elliston. If the right is unexercised the District Council of Elliston will refund the interment right holder an amount calculated in accordance with section 34 (2) of the Burial and Cremations Act 2013, and section 31 of the Regulations. If the right has been exercised (remains have already been interred in line with the interment holder's request) then the holder is not entitled to a refund.

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To be completed by interment right holder

A) Interment of Bodily Remains

Date of Burial: _____ Time of Burial: _____ am/pm

Depth:
- ☐ Single
- ☐ Single but part of companion (side-by-side)

Interred in:
- ☐ Coffin
- ☐ Other receptacle
- ☐ Shroud

Coffin/casket size:
- ☐ Standard
- ☐ Other, If other (length x width)

_____(in millimetres)

- ☐ Vault
- ☐ Re-opening - If re-opening, please provide the Name of the first Interment_____

B) Interment of Cremated Remains

Date of Interment: _____ Time of Interment: _____ am/pm

Location:
- ☐ Directly into earth (grave plot)
- ☐ Niche Wall

Container type if in grave plot:
- ☐ Container size for grave plot internment _____(in millimetres)
- ☐ Council container required for Niche wall as is specific size to fit

Name Plate / Certificate Identification arrangements

(Please indicate a time and place to meet, for verification e.g. cemetery, council office, hospital)

Time: _____ am/pm Place: _____

Further information
(please state if chairs, or a portaloo or a gazebo required) _____

Fees to be paid by:_____

Address: Email:

Home phone: Mobile:

Office use only	
Interment no:	Date of Authorisation:
Partial Certificate of Cause of Death or Medical Certificate cause of Death or Coroners Authority received: YES / NO	
Certificate of Identification of deceased received: YES / NO	
For Ashes Interment – copy of Cremation Certificate received: YES / NO	
Authoriser name:	Authoriser Signature:

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