



MONUMENT APPLICATION

Company Name:.....
(Company supplying headstone)

Contact Person:..... Phone No:

Cemetery: Date of Work:

Section: Row: Plot:

Wall: Side: No:

Garden: Section: Plot:

Full Name of Deceased:

Date of Birth: Date of Death:

Name of Right of Burial Holder:

Signature: Date:

I consent to the below mentioned customer making arrangements for a monument/2nd inscription.

Name of customer requesting monument:

Address:

Signature: Contact No:

Where the holder of the Right of Burial is a different person to the customer, Richmond Valley Council must be provided with written notification from the holder of the Right of Burial that they consent to the customer arranging the monument erection.

If Executor making arrangements, was proof provided Yes/No

Signature of Council Officer:

Name of Officer:

Approved by Richmond Valley Council on

Attach Copy to Database Record Insert Permit No – Database Approval Emailed

Database Record No: #.....