

Address:

## **City of Port Lincoln**

Level One, Civic Centre, 60 Tasman Terrace, Port Lincoln SA 5606

**Template No** 

**Postal Address:** PO Box 1787, Port Lincoln SA 5606

Email: plcc@plcc.sa.gov.au Web: www.portlincoln.sa.gov.au

File Ref: 16.16.11.2

16-71-T2

## NORTH SHIELDS GARDEN CEMETERY APPLICATION FOR A CREMATION MEMORIAL

This form is to be submitted with 16-16-T2 Interment Application – Burial Authority

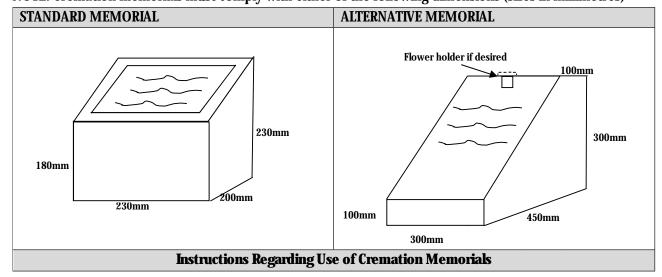
| Applicant Name:   |             |
|---|-------------|
| Postal Address:   |             |
| Phone:  | Email:      |
| Person Responsible for payment of fees (if different to above): |             |
| Postal Address:   | <del></del> |
| Phone:  | _ Email:    |

I (the applicant) hereby make an application for the following Cremation Memorial at the North Shields Cemetery:

| CREMATION MEMORIAL OPTIONS   | MEMORIAL FEES As at 1st July 2023 |
|--|-----------------------------------|
| Standard Memorial with bronze plaque Includes Interment Right, Bronze Memorial Plaque, Base and Interment of Ashes | \$1725.00                         |
| Bronze Memorial Plaque, Base & Interment of Ashes Interment right previously reserved                              | \$925.00                          |
| Alternative Memorial - includes Interment Right and Interment of Ashes (Applicant to supply complete memorial)     | \$1165.00                         |
| Bronze Plaque (Replacement plaque)   | \$560.00                          |
| Interment of Ashes   | \$365.00                          |
| Reservation of adjacent site – Interment Right fee only  | \$800.00                          |

## NO INSCRIPTION OR MARKINGS WILL BE ALLOWED ON THE BACK OF PLAQUE

NOTE: Cremation memorials must comply with either of the following dimensions (sizes in millimetres)



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| <ul> <li>All applications subject to regulation of cemetery authority.</li> <li>Applications only accepted on prescribed form.</li> <li>Proof will need to be signed off by applicant once received back from supplier.</li> </ul> | <ul> <li>Full detail of wording of proposed inscription and accurate translations of inscriptions if not in English on attached page.</li> <li>Plaques can take up to 6-8 weeks to arrive.</li> <li>Fee for additional proofs apply.</li> </ul> |
|--|---|
| DETAILS OF WORDING TO  | BE INSCRIBED ON THE PIAQUE:   |
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| Diago  | e Note:   |
| rieaso   | e Note:   |
| Any more than 8 lines, a fee   | e of \$38.50 per line is charged  |
| Maximur  | m lines: 12   |
| Maximum letters  | and spaces per line:  |
|  |   |
| Nam  | ne: 18  |
| Tex  | xt: 27  |
| acknowledge that I have read and understood the  | instructions regarding use of cremation memorials and   |
| S .  |   |
| ereby apply to order a plaque with details within the  | ne application;   |
|  | ne application;   |
|  | ••  |
| 'ull name:   |   |
| 'ull name:   |   |
| full name:   | Date:   |
| full name:  Applicant signature:  Existing Interment Right Details (adjacent site reserv   | Date:   |
| full name:  Applicant signature:  Existing Interment Right Details (adjacent site reserved)  Hame of Interment Right Holder:   | Date:   |
| Full name:  Applicant signature:  Existing Interment Right Details (adjacent site reserved)  Name of Interment Right Holder:   | Date:   |
| Applicant signature:   | Date:   |
| Full name:  Applicant signature:  Existing Interment Right Details (adjacent site reserved)  Name of Interment Right Holder:  Interment Right No:  DEFICE USE ONLY:  | Date:   |
| Full name:  Applicant signature:  Existing Interment Right Details (adjacent site reserved)  Name of Interment Right Holder:  Interment Right No:  DEFICE USE ONLY:  | Date:   |
| Applicant signature:   | Date:   |