

# Placement of Ash Remains in Burial Site Application Form 2025/2026



| If you need help lodging your form, contact us |  |
|--|--|
| Email  | cemeteries@northernbeaches.nsw.gov.au                                |
| Phone  | 1300 434 434   |
| Cemeteries                                     | Manly Cemetery<br>Griffiths Street, Manly NSW 2095                   |
|  | Mona Vale General Cemetery<br>107 Mona Vale Road, Mona Vale NSW 2103 |

| Office use only |           |
|-----------------|-----------|
| Form ID         | 4063      |
| TRIM Ref.       | C001827   |
| Last updated    | June 2025 |
| Business unit   | Property  |
| Receipt No.     |           |

| Privacy Protection Notice |   |
|---------------------------|---|
| Purpose of collection     | For Council to provide services to the community  |
| Intended recipients       | Northern Beaches Council staff  |
| Supply                    | If you choose not to supply your personal information, it may result in Council being unable to provide the services you seek |
| Access/Correction         | Please contact Customer Service on 1300 434 434 to access or correct your personal information                                |

| Privacy Declaration  |  |
|--|--|
| <p>Information collected on this form is held in accordance with the Privacy and Personal Information Protection Act 1998. Personal information is collected for a lawful purpose that directly relates to our primary function of providing cemetery/cremation services in accordance with the Cemeteries and Crematoria Act 2013. We will not collect any more information than is necessary to fulfil these functions. Except as necessary to carry out these functions, we will not disclose your personal information to anyone without your consent unless legally required to do so. We will take all reasonable steps to protect the security of any personal information held, be it stored in electronic or hard copy format. You may request access to your personal information held by us, except in the circumstances set out in Part 2, Division 3 of the Privacy and Personal Information Protection Act 1998.</p> |  |

## Part 1: Details of the deceased

|                                      |      |              |          |        |                |  |
|--------------------------------------|------|--------------|----------|--------|----------------|--|
| Title                                | Mr   | Mrs          | Ms       | Other  | Gender         |  |
| First name/s                         |      |              |          |        |                |  |
| Last name                            |      |              |          |        |                |  |
| Address of deceased                  |      |              |          |        | Postcode       |  |
|                                      |      |              |          |        | Place of birth |  |
| Date of birth (dd/mm/yyyy)           |      |              |          |        | Age            |  |
| Date of death                        |      |              |          |        |                |  |
| Cause of death                       |      |              |          |        |                |  |
| Place of death                       | Home | Nursing home | Hospital | Other: |                |  |
| Place of death address (if not home) |      |              |          |        | Postcode       |  |
|                                      |      |              |          |        |                |  |
| Is Veteran                           | Yes  | No           |          |        |                |  |
| Marital status                       |      |              |          |        | Religion       |  |
| Former occupation                    |      |              |          |        |                |  |
| Funeral director                     |      |              |          |        |                |  |
| Crematorium                          |      |              |          |        |                |  |
| Current location of ash remains      |      |              |          |        |                |  |

## Part 2: Placement process

|   |           |         |                         |
|---|-----------|---------|-------------------------|
| When the Interment Rights Holder is deceased, an Application for Transfer of Interment Rights must be lodged and approved before permission to proceed with the Ashes Placement can be granted. |           |         |                         |
| Site location   | Manly     |         | Mona Vale               |
| Denomination  |           |         | Site number             |
| Section   |           |         |                         |
| What is the desired location of the ashes in the grave? (see diagram below)   |           |         |                         |
| Do family wish to be present at ashes placement.<br>If YES, propose date and time below. Please contact cemetery for bookings <b>(additional fees apply)</b>                                    |           |         | Yes                  No |
| Proposed date and time:   |           |         |                         |
| If NO, place ashes:   |           | ASAP    | When plaque is ready    |
| Container   |           | Size:   | Shape:                  |
| Material:   | Cardboard | Plastic | Wood                    |
| Other:  |           |         |                         |

### Headstone

|           |            |
|-----------|------------|
| TOP LEFT  | TOP RIGHT  |
| MID LEFT  | MID RIGHT  |
| FOOT LEFT | FOOT RIGHT |

### Please note:

|  |
|--|
| Ashes will be interred as close as possible to the desired location at the discretion of the caretaker.              |
| The ashes will be placed underground in the same container as supplied by the Crematorium unless by special request. |
| Placement will not proceed until account is paid.  |

### Location diagram

## Part 3: Interment Rights Holder/Secondary contact details

|                              |                                |        |               |
|------------------------------|--------------------------------|--------|---------------|
| Title                        | Mr      Mrs      Ms      Other | Gender |               |
| First name/s                 |                                |        |               |
| Last name                    |                                |        |               |
| Address                      |                                |        | Postcode      |
|                              |                                |        |               |
| Relationship to the deceased |                                |        | Date of birth |
| Home phone                   |                                |        | Mobile        |
| Email                        |                                |        |               |
| Signature                    |                                |        | Date          |

### Office use only

|                         |     |                             |                          |
|-------------------------|-----|-----------------------------|--------------------------|
| Stone orchard updated   |     | Ash remains placement date? |                          |
| Cemetery invoice raised |     | Forms scanned to TRIM       |                          |
| Date account paid?      | Yes | No                          | Confirmation letter sent |