

CASSOWARY COAST REGIONAL COUNCIL PO Box 887 INNISFAIL QLD 4860 Ph: 1300 763 903 Fax: (07) 4061 4258 Email: enguiries@cassowarycoast.gld.gov.au

# Approved Form 7.25 Erection of a Memorial, Vault, Columbarium or Full Grave Slab

### Applicable Law:

Cassowary Coast Regional Council Local Law No. 1 (Administration) 2022

Cassowary Coast Regional Council Local Law No. 7 (Human Remains and Cemeteries) 2022

### **Council Reference:**

**Property Number:** 

Note: These numbers are important and should be used on all correspondence in relation to this matter.

# Your Application will not be properly made unless the Approved Form 1.7: Application to Council (What I Want) is attached

Note: the applicant is the person responsible for making the application and need not be the owner of the land. The applicant is responsible for ensuring the information provided on all Cassowary Coast Regional Council application forms is correct. Any approval that may be issued as a consequence of this application will be issued to the applicant.

#### Information regarding the erection of a memorial, vault, columbarium or full grave slab

Applicant	First Name				Surname					
Details	Phone Contact Details		Mob:		Home:			Work:		
	Postal Addre	ess / Email								
	Relationship	to Interred								
	Are you the Next of Kin, authorised person or a				a Funeral 🛛 Yes 🗆 No			)		
	Director app	proved to ma	ke this application?	this application? Plea			se supply supporting information			
Billing	Bill to									
Details	<b>Billing Email</b>	Address								
	Billing Postal Address									
	Mobile Phone Number									
		PLEASE NOTE: Where applications are provided without payment, an Invoice will be issued to the								
	Biller listed. If the Invoice is not paid within 10 business days, the application will lapse.									
Director	Not Appl	icable	Black's Funerals	ls 🛛 🗖 Heritage Funera		eral 🗖	Other:			
Location	🗖 Innisfail		🗖 Tully		Cardwell			🗖 Other		
Interred	First Name									
Details	Middle Nam	e								
	Surname									
	Date of Deat	th								
	Section Number				Row Number					
	Plot Number			Plot Prefix / Suff		ix				
Declaration	I, the applicant as detailed above, hereby submit application for:									
of		onumental Wo						<u>&amp; 2</u> (overleaf)		
Applicant	Lawn Cemetery Plaque Installation I have <u>completed Section 1</u> I verify that all information provided in this application to be true and correct.									
	Signed: Click here to enter text. Date: Click here to enter text.									
			OFFICE USE	ON						
Cemetery	Cleaning Deposit Refund Approved (Monumenta				al Works only)		🗖 Yes	🗖 No	🗖 n/a	
Sexton	Plaque installation Completed				ate of stallation			·		
	Name of Sexton			Sig	gnature					

## SECTION 2 (for Monumental Works)

Sketch Plan or Description of proposed concrete slab/headstone to be shown below or <u>ATTACHED</u>:

Monumental Works - Cleaning Deposit Conditions: If work is not completed 3 months after date of application the cleaning deposit will be refunded, and a new application will be required.

		SPECIFICATIO	NS			
Monumental V	Norks:					
Monumental Grave Headstone Specification	Maximum whole of site co (3.048m x 1.829m)	verage	$ \begin{array}{c} \\ \hline \\ $			
Monumental	Maximum Height:	600mm	$\frown \frown \bullet$			
Lawn Headstone	Maximum Base Width:	200mm	600mm			
Beam	Maximum Base Length:	800mm	$ \longleftrightarrow  $			
	Leading edge of monumen	tal headstone recessed	150mm from concrete beam edge.			
Angel View Lawn	Maximum Height:	600mm	600mm			
Headstone Beam	Maximum Base Width:	200mm				
	Maximum Base Length:	600mm	200mm			
Diagona	Leading edge of monumen	tal headstone recessed	150mm from concrete beam edge.			
Plaque: Innisfail	Lawn Plaque		380mm wide x 216mm high			
Cemetery						
	Columbarium Wall Plaque		177mm wide x 140mm high			
	Angel View - Lawn Plaque		380mm wide x 216mm high			
	Angel View – Columbarium	n Wall Plaque	150mm wide x 120mm high			
	Angel View – Memorial Wa	all Plaque (No ashes)	150mm wide x 110mm high			
Tully	Large Lawn Plaque		559mm wide x 305mm high			
Cemetery	Small Lawn Plaque		380mm wide x 216mm high			
	Columbarium Wall Plaque		230mm wide x 185mm high			
	Infant Wall		380mm wide x 280mm high			
Cardwell	Large Lawn Plaque		550mm wide x 300mm high			
Cemetery	Small Lawn Plaque		380mm wide x 280mm high			
	Columbarium Wall Plaque		225mm wide x 220mm high			

Criteria for assessment of application						
General Criteria under Local Law No. 1 (Administration) 2022						
<ul> <li>Council must assess your application against the general criteria. To assist council's assessment you must provide the following information as an attachment to this application: <ol> <li>proof that you currently hold any separate approval relating to the activity that is required under another law, including proof of any conditions, plans or limitations that attach to the approval;</li> <li>proof that the management of the activity will protect public health, safety and amenity and prevent environmental harm;</li> <li>identify best practice management for the proposed activity;</li> <li>if the activity is to be conducted on trust land, say why the activity is consistent with the purpose of the trust;</li> <li>indicate how the activity will benefit the good rule and governance of the Cassowary Coast;</li> <li>indicate whether you have been convicted of a breach of a local law within the last three years; and</li> <li>whether an approval for the same or similar activity was given under the repealed local laws.</li> </ol> </li> </ul>						
Additional criteria under Local Law No. 7 (Human Remains and Cemeteries) 2022						
<ul> <li>Council must assess your application against the additional criteria that apply to this activity specifically. To assist</li> <li>Council's consideration, please provide the following information as an attachment to this application:</li> <li>9. construction details of any memorial, vault, columbarium or full grave slab to be erected;</li> <li>10. planting details of any tree memorial;</li> <li>11. the proposed location of the memorial, vault, columbarium or full grave slab;</li> <li>12. details of the finish proposed to any memorial, vault, columbarium or full grave slab, including any words to be used;</li> <li>13. evidence of the applicant's relationship (if any) with the deceased; and</li> <li>14. for a memorial whether the ashes or other remains are placed in a columbarium, vault, grave or full grave slab.</li> </ul>						
I/ We declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application						
PRINT NAME DATE DATE						

**Information Privacy Statement:** Your personal information has been collected for the purpose of assessing your Application for a Permit. The collection of your information is authorised under the *Local Government Act 2009*. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the *Information Privacy Act 2009* and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission or the disclosure is required by law

## THIS PAGE - OFFICE USE ONLY

PLAQUE PLACEMENT & MONUMENTAL WORKSAPPLICATION								
Fees & Charges Checklist				Tick	GST	Total Inc GST		
Monumental Works	Works Permit		0.00	123.50				
	Cleaning Deposit Bond - G		0.00	156.50				
	Cleaning Deposit Bond - C		0.00	522.00				
	Cleaning Deposit Bond - C by contractor and held by		n/a	n/a				
Plaque	Plaque Placement: Lawn ( (Plaque to be placed by Co		23.36	257.00				
	Plaque Placement: Niche Niche plot still needs to be Application		23.36	257.00				
	If you would like to place ashes and have a plaque fixed in place on niche wall or grave site, please fill out the <b>Burial Application Form</b> on the CCRC website.							
Application ID	□ CEM_P_ □ CEM_M_							
Customer Service	Receipt Number:	Bond banked to trust fund						
	Customer Service Officer: Name Date:							
	Bond included in Recei	pt	Receipt Attached	Total	\$			
Cemetery Office	Related Cemetery Applica	CEM_I_						
	Bond Refund processed	(Refund	No     (Refund Not     approved)	🗖 n/a				
	Add to Dashboard Spreadsheet Copy sent to Cemetery Sexton							
Records Officer	Name ID: Duplicates merged			Marked as Deceased				
	Records Officer:			Deceased ECM address				