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Application Form - Cemetery – Burial Plot Reservations

Applicant Section:

First Name:	
Surname:	
Address:	
Town/Suburb:	P/Code:
Phone:	
Email:	
Requested Plot Number:	

SIGNATURE OF APPLICANT

DATE

CHIEF EXECUTIVE OFFICER

DATE

Payment Section:

The following payment information will need to be entered by the officer that processes the payment.

Application Fee: \$	Account No: 30403706
Receipt No:	Date Paid:

PROCESSING OFFICER

DATE

Records Section:

Record No:	File No:
Date Entered:	

RECORDS OFFICER