Application for Funeral Director's Per Burial Licence

Cemeteries Act 1986, Cemeteries Local Law 2022

I, hereby apply for the issue of a licence to undertake a funeral within Cemeteries located in the Shire of Dardanup and submit the following details in support of this application.

APPLICANT DETAILS	
Company or Trading Name:	
Applicant Name and Position held within Company:	
Company Address:	
Postal Address:	
Contact Number:	
Email Address:	
Details of any offences under the *Cemeteries Act 1986*, *Cremation Act 1929* or the Local Laws of any Cemetery for which the Applicant or persons employed by the Applicant or Company have been convicted:	
Copy of Insurance Certificate of Currency attached? **Yes** ☐ **No** ☐	
I, the applicant, understand this licence will be issued pursuant to the *Cemeteries Act 1986,* the Shire's Local Law and any other relevant statues or Regulations now and hereafter in force. I agree to provide Public Liability Insurance Cover and Workers Compensation Insurance Cover (where applicable) as a condition of my licence. I agree to provide details of these insurance policies	
Signature:	**Date:**

Date of Burial:		**Time of Burial:**	
Name of Deceased:		**Plot Details:**	

Shire of Dardanup, PO Box 7016, EATON, 6232
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