

CEMETERY RESERVATION FOR INTERNMENT OF ASHES

Name of Decedent		Date of Death	
Date of Birth		Aged	

Location	<input type="checkbox"/> Dardanup Rose Garden	<input type="checkbox"/> Ferguson Rose Garden
	<input type="checkbox"/> Dardanup Niche Wall	<input type="checkbox"/> Ferguson Niche Wall
	<input type="checkbox"/> Dardanup Cemetery Plot	<input type="checkbox"/> Ferguson Cemetery Plot
	Plot Number -	
Options	<input type="checkbox"/> Bronze Plaque Engraved, Concrete Plinth, Garden Niche and Interment of Ashes	\$
	<input type="checkbox"/> Interment of Ashes Fee	\$

Name of Representative	
Address	
Contact Number	
Email	
Total Amount Payable	\$
Special Instructions	
Wording	
Signature	

Office Use Only:	
Name of Officer	
Signature	
Date	

**Note: Copy of receipt must be attached to this application form prior to order being placed*



Lettering for plaque to be entered into the boxes below:

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
24 PT																						
36 PT																						
24 PT																						
24 PT																						
24 PT																						
24 PT																						
24 PT																						
24PT																						

Note: Plate M102 – Half Size Plate –onto Double Niche Plate C279121E
 Maximum letters and spaces per line: 19 – Smaller font size [24]
 Maximum letters and spaces per line 13 – Larger font size [36]