

Application for issue of Interment Warrant

Details of interment

Name of deceased:			
Place of residence:			
Age:		Religion:	
Occupation:		Date of death:	
Funeral date:		Time:	
Estimated arrival time at cemetery:			
Funeral director:			
Cemetery:			
Plot previously reserved?		YES / NO	
		If YES, under what name?	
Berm / Row/ Plot number allocated:			
Size of grave: (please tick) Standard <input type="checkbox"/> Extra Depth <input type="checkbox"/> Reopen <input type="checkbox"/> Ashes <input type="checkbox"/>			
Type of Handles: Fixed <input type="checkbox"/> Dropdown <input type="checkbox"/>			
Size of casket: Width :..... Length :..... Height :.....			
Medical Certificate of Causes of Death Attached:		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Lowering Device: Yes <input type="checkbox"/> No <input type="checkbox"/>		Straps & Bearers: Yes <input type="checkbox"/> No <input type="checkbox"/>	

I/we the undersigned being/in the absence of the person registered/to be registered as the grantee of the grave above mentioned **DO HEREBY REQUEST** to Waikato District Council to allow the grave to be opened and the body of the person above to be interred therein.

I certify I am duly empowered to authorise the opening of the grave and I/we, the undersigned, **DO HEREBY INDEMNIFY** Waikato District Council against all actions, proceedings, claims, demands, damages, costs, losses and expenses whatsoever by reason of Waikato District Council having consented to the opening of such grave and the interment therein.

I/we acknowledge and accept personal liability for the full payment of all fees herein described.

Full name of applicant:	
Street address:	
Postal address: (if different)	
Telephone:	Mobile:
Relationship to deceased:	
Signed:	Date:

Payment Details

Payment in full (Preferred)	Payment by arrangement
Plot charge: \$	(to be approved by Finance Manager)
Interment services fee: \$
Total payable: \$
Payment made: \$
Date:
Receipt number:

Please return this form to:

Post Waikato District Council, Private Bag 544, Ngaruawahia 3720
Email cemeteries@waidc.govt.nz
Fax 07 824 8091