

# Application for plaque

## Cemeteries



Folder 119623 Workflow Plaque Doc ID \_\_\_\_\_ Box No \_\_\_\_\_

Council agrees that plaque inscription must include the name, age and date of death of the individual. Pursuant to Council *Policy 252 – Cemeteries*, applicable costs are to be paid in full, on approval of plaque quote and proof.

### DECEASED DETAILS

Surname		First name		Middle names
Cemetery	Section	Row	Plot/Niche	Cemetery Type <input type="checkbox"/> Lawn <input type="checkbox"/> Monumental <input type="checkbox"/> Columbarium

### APPLICATION SUBMITTED BY:

Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss		Surname	Given names	
Postal address		Town	State	Postcode
Contact number	Email address			
Relationship	Are you the ROI Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No		If unknown, contact NBRC to confirm	
Signature			Date	

### APPLICATION PROCESS

1. Complete this application
2. Provide high resolution digital images to Council if you are using photographs on plaque
3. Receive proof and costs for plaque from Council
4. Reply to Council with amendments if necessary and/or approve final proof and costs of plaque
5. Make payment of fees due as advised by Council
6. Receive advice from Council that plaque has been installed

### PLACEMENT DETAILS

Completed <i>Application for Interment</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>NOTE: A representative must be present for the interment of ashes</b>
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### LODGEMENT OF YOUR APPLICATION

MAIL Chief Executive Officer, North Burnett Regional Council, PO Box 390, Gayndah, Qld 4625  
EMAIL [admin@northburnett.qld.gov.au](mailto:admin@northburnett.qld.gov.au) TELEPHONE 1300 MY NBRC (1300 696 272)  
IN PERSON Visit your local library and customer service centre

### OFFICE USE ONLY

Information received by	Date and time	NBRC contact officer
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#### Information Privacy Act 2009 collection notice

NBRC is collecting the information on this form for the purposes of processing your application. NBRC may share some or all of this information with other government authorities and third parties involved in the processing of this Application. Your personal details will not be disclosed to any other third party without your consent unless required or authorised to do so by law.

## PLAQUE DETAILS

### Single (complete if required)

Lawn  Niche  Other

Design no:

Size:

### Double (complete if required)

Lawn  Niche  Other

Design no:

Size:

1<sup>st</sup> plaque (full plaque with detachable screws)

2<sup>nd</sup> plaque (detachable plaque to fit on full plaque design)

### Shape

Standard Rectangle

Oval (lawn only)

Other:

### Colour

Brown

Light Brown

Pale Pink

Fuchsia

Burgundy

Red

Teddy Blue

Trac Blue

Dark Blue

Teal

Turquoise

Green

Violet

Black

### Border

Standard (9)

Floral (2)

Fancy Floral (7)

Woven (4)

Thick Woven (6)

Roman (2)

Leaves (10)

Heart (15)

Star (27)

Other:

### Photograph / Emblem

Left Placement

Centre Placement

Right Placement

Other Placement

Emblem number:

Or Image attached:

If other placement, please describe:

### Photograph Border

No Border

Standard

Thick Woven

### Photograph Details

Please provide a high resolution photograph in digital format with your application.

Note: Use of emblems and photographs may reduce lines available for wording.

Custom sizing is subject to available space on the plaque and photo quality.

30mm

2.5 x 3.5cm

3 x 4cm

Custom size:

## LINE SEQUENCE

Refer to Worsell Design number for available lines. Please order the sequence if using optional lines.

Un-ordered sequences will be ordered automatically starting from Line 1 "IN LOVING MEMORY OF" or "CHERISHED MEMORIES OF" and increasing up to available lines.

### Line:

IN LOVING MEMORY OF

CHERISHED MEMORIES OF

TREASURED MEMORIES OF

Other:

### Line:

Surname

First name

Middle names

Other

### Line:

WHO PASSED AWAY

WHO PASSED AWAY ON

WHO DIED

WHO DIED ON

Other:

### Line:

Date of death:

Date in full

Numerical date

Other:

### Line:

Age of

Aged

years

Aged

years and

months

Other:

Line:

LOVED AND REMEMBERED ALWAYS     IN GOD'S CARE

Other:

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Line:

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Line:

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### PLAQUE LAYOUT

Applicant to complete this section only if necessary i.e. If customer cannot accommodate their requirements above, otherwise attach final plaque proof with completed *Customer Authorisation* to this application