

APPLICATION FOR MEMORIAL SEAT/PLAQUE

1. Details of the Applicant

Mr Ms Mrs Other

Given name Family name

Unit/Street No. Street Name Suburb Postcode

Daytime Telephone Mobile Email

Applicant Signature Date Relationship to Deceased

2. Details of the Deceased

Given Name Surname

Last Address of Deceased

Date of Birth Date of Death Age at Death Sex (Male/Female)

3. Location

Street Address Suburb

Landmark/Identifying Characteristic

Property ID (Office Use Only):

4. Plaque Wording (Plaques are 136mm x 76mm with standard font up to 6 lines of text)

Line 1

Line 2

Line 3

Line 4

Line 5

Line 6

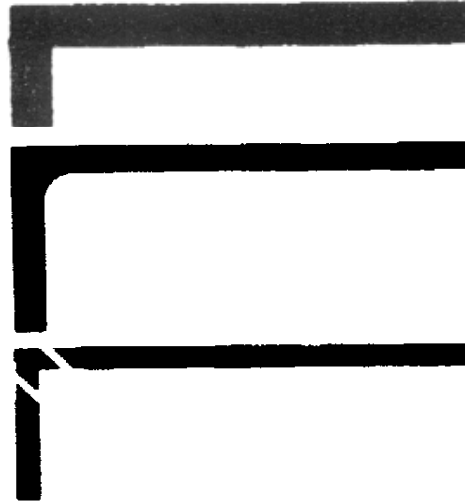
5. Borders

Please tick to indicate preferred border. If nothing chosen Border No. 1 will be used

Border No. 1

Border No. 2

Border No. 4



6. Privacy Notice

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

The information on this form is being collected by Shellharbour City Council for the purpose of providing you with a service. Your personal information will be used by Council staff for the purpose of determining your request. This completed form will be placed on a relevant file and/or saved in Council's electronic records management system. You may apply to Council for access to this information. Requests for correction of your personal information can be made under the *Privacy & Personal Information Protection Act 1998*. Please see Council's **Privacy Management Plan** or contact Council's Public Officer for more information.

7. Checklist for Customer Services

Cost of Plot:

Application Number

Debtor Number (CEM000000)

Paid by CHEQUE <input type="checkbox"/>	EFT <input type="checkbox"/>	CASH <input type="checkbox"/>
Amount \$	Rec. No	
DATE	Mail <input type="checkbox"/>	Counter <input type="checkbox"/>

8. Office Use Only

<input type="checkbox"/> Application Scanned	<input type="checkbox"/> Works Order Completed?
<input type="checkbox"/> Noted in Miscellaneous Accounts	W/O Number <input type="text"/>
<input type="checkbox"/> Plaque Ordered from Arrow Bronze	<input type="checkbox"/> Plaque delivered to depot <input type="text"/>
<input type="checkbox"/> Requisition Number <input type="text"/>	<input type="checkbox"/> Family advised <input type="text"/>
<input type="checkbox"/> Plaque Arrived <input type="text"/>	<input type="checkbox"/> Update P&R with Date of Placement
Cemetery Administration Officer <input type="text"/>	Date <input type="text"/>