



Application For Permit to Erect a Monument

Form/Fees valid 1 July 2024 to 30 June 2025

CASTLE HILL CEMETERY SACKVILLE CEMETERY

To the Cemetery Coordinator,
At the request of the owner of the grave, I hereby apply for permission to:

Install a monument \$672

Inscription Only \$338

Name of deceased

Section

Row Number

I attach plans of the proposed work, showing the correct measurements, the date that I shall commence and finish the work, and a copy of the inscription.

I agree that the work shall be carried out to the satisfaction of the Coordinator in charge of the Cemetery and will comply with the Australian Standard for Monuments and Headstones (AS4204:2019) and WHS Standards. I will remove all refuse when the work is complete or at any time when instructed to do so. I acknowledge if Council deems any work to be non compliant, it will be removed.

Signature of Monumental Mason

Date

Print Name

Contact No.

Company Name

Address

Suburb

Postcode

Email

Stonemason Licence No

Expiry Date

OFFICE USE ONLY

Receipt No.

Amount Payable

Date

AUTHORITY TO BE SIGNED BY OWNER OF THE INTERMENT RIGHT

I give permission for _____
to install _____

on the grave located in Section: _____ Row: _____ Number: _____

and should such work interfere with the reopening of any of the said graves for future interments, I will remove any obstructions eight hours prior to the time fixed for the interment.

Owner of the grave YES NO If no what authority and relationship to the owner do you hold for the application?

Signature of Owner/s	Date
Print Name	Contact No.
Address	
Suburb	Postcode
Email	

SKETCH OF PROPOSED WORK PROPERLY DIMENSIONED

Large empty box for sketching proposed work.

Date of commencement and completion of proposed work From: _ / _ / _ To: _ / _ / _

For further inquiries please contact Council's Cemetery Officer on 8848 6724.
PLEASE NOTE: Council recommends that no work commence until the application has been approved.

Version 1: 20/06/2024