

INTERMENT AUTHORITY APPLICATION

SF172B

Responsible Officer: DS

Issue Date: 16/01/2023

Next Review Date: September 2026

Page 1 & 2 must be completed & signed by the Funeral Director then returned to Yorke Peninsula Council for approval, prior to proceeding with an interment at the cemetery named below. **Page 3 must also be completed** when the Interment Right is exercised by a person other than the Interment Right holder.

INTERMENT LOCATION

Name of chosen Cemetery _____

DETAILS OF DECEASED

Title: Dr Mr Ms Mrs Miss Gender: M / F

Last Name _____ First Name/s _____

Last Known Address _____

Suburb _____ State _____ Postcode _____

Date of Birth _____ Date of Death _____ Age _____

INTERMENT INSTRUCTIONS

Ashes placement: YES / NO If yes, placement in niche wall or ground: _____

Excavation of plot -

Is current interment (*please circle one*) 1st 2nd interment 3rd interment or more

If 2nd or 3rd, name of interred/s _____

Excavation depth required _____

Lift and Deepen Required YES / NO *Must be in accordance with the Burial & Cremation Act 2013*

Coffin Type: Coffin / Casket

Coffin / Casket Size (millimetres): Length _____ X Width _____

Excavator: _____ Contact Name & Phone No: _____

Note: No excavation to be carried out at the cemetery unless Council staff have notified the nominated Excavator that marking of the plot is complete.

Please select A or B below

☐ A) NEW INTERMENT RIGHT REQUIRED –

NB: Council's SF172A Application for New Cemetery Interment Right and Plain English Statement must be completed to accompany the Interment Authority

The next available plot, niche or memorial garden site will be allocated by the Yorke Peninsula Council.

YPC OFFICE USE ONLY: Plot, niche or memorial garden number _____

Section / wall / road name _____

☐ B) EXISTING INTERMENT RIGHT

NB: If the Interment Right is in the name of the deceased, the person authorising the interment then becomes the interment right holder of that site, unless otherwise notified. Please refer to page 3 for rights & responsibilities.

Interment Right Number _____ Name of IR holder(s) _____

Site number of plot, niche or memorial garden _____

Section / wall / road name _____

Extension of right renewal YES / NO _____ Years to be extended _____

PERSON AUTHORISING INTERMENT

Last Name _____ First Name/s _____

Current address _____

Suburb _____ State _____ Postcode _____

DOB: _____ Contact Phone Number(s): _____

Email _____

Relationship to deceased _____

FUNERAL DIRECTOR DETAILS

Private Funeral YES / NO

Date of Interment _____ Time of service _____

Person Officiating _____

Funeral Director Name _____

Funeral Director Address _____

Suburb _____ State _____ Postcode _____

Telephone _____ Mobile _____

Email _____

Person making arrangements on behalf of Funeral Director

Last Name _____ First Name _____

I agree to be bound by the general instructions and policies of the Yorke Peninsula Council.

Signature on behalf of Funeral Director _____ Date _____

NAME PLATE / CERTIFICATE IDENTIFICATION ARRANGEMENTS

(Please indicate a time and place to meet, for verification)

Time: _____ Place _____

YPC OFFICE USE ONLY

Interment Number: _____ Name Plate Checked: YES / NO

Partial Doctors Certificate / Certificate of Identification Attached YES / NO

Council Authorisation: _____ Name: _____

Signature: _____

Once documentation is sighted, copies must be provided and attached to the Interment Authority, in accordance with the Burial and Cremation Act 2013

Authority to exercise an Interment Right – other than by the IR holder

By authorising the interment of the deceased, in accordance with the descending order of priority set out below, the Interment Right will be transferred into the name of the authorised person and a new Interment Right Certificate issued.

Authority to exercise the Interment Right

- Where the interment right holder is deceased, the interment right may be exercised by the personal representative of the deceased (in accordance with Section 35 of the Burial and Cremation Act 2013) being a person aged 18 years or more who is –
 - The executor of the estate of the deceased person or, if there is more than 1 executor, 1 of the executors acting with the permission of all the other executors; or
 - The administrator of the deceased person's estate.
- If there is no personal representative the interment right may be exercised in accordance with Regulation 32 of the Burial and Cremation Regulations 2014 as follows:
 - By the spouse or domestic partner of the deceased interment right holder; or
 - If there is no surviving spouse or domestic partner, by the eldest living relative of the deceased interment right holder in the following descending order of priority:
 - A child;
 - A grandchild or great grandchild;
 - A brother or sister;
 - A parent;
 - A grandparent;
 - An aunt or uncle;
 - A nephew or niece;
 - A cousin;
 - Any other blood relative.

I declare that I am the person Authorised to exercise the interment right in accordance with the conditions listed above and will now become the Interment Right holder.

Authorised Persons Name *(please print)* _____

Authorised Persons Signature _____

Date _____