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Office:
Date:///
Time:
Name:

## **CREMATION APPLICATION**

Local Government Act 2009 - Local Law No. 4 (Local Government Controlled Areas, Facilities and Roads) 2011 Subordinate Local Law no. 4 (Local Government Controlled Areas, Facilities and Roads) 2011

This is an application for the cremation of a deceased person at Boyne Tannum Memorial Parklands (BTMP). All fields are required to be completed unless otherwise stated. Written confirmation from Gladstone Regional Council will confirm the approval of this application. If you have any queries, please contact Gladstone Regional Council on (07) 4970 0700.

**Privacy Statement:** The Gladstone Regional Council is collecting your personal information on this form to process this request. The information will only be used by authorised council employees for the purposes of this request, or for the purpose of performing other Council functions and responsibilities. Your personal information will not be given to any other person or agency unless you have given us permission to do so or we are required to do so by law.

## SERVICE DETAILS

Date of service:		(Cremation n	nay not occur on th	e same day of funeral service)	
Service Type:	□ Chapel Hire (at cost)	Set up time:	Se	rvice time:	
	□ Pallbearers:	□Yes □No			
	□ No Attendance Delive	ery time:			
Size of Service:	□ Small (0-50) □ Me	dium (50-100)	□ Large (100+)	)	
Special requests (i	.e. Additional hire time, add	litional urns, organ use	, government ass	sisted, cultural requirements):	
The cremated rema	ains are to be 🛛 Interred b	y Council (BTMP ONL	Y Ashes Interme	nt Application required)	Collected from BTMP
Are the details of the	ne service private? 🗆 Yes	□ No			
Coffin Material:	□ Timber □ MDF	□ Other:			
Coffin Size:	□ Standard	Oversized		□ Custom:	
	max size (mm)	max size (mm)		Length :	
	2000L x 600W x 350D	2150L x 650W	x 450D	Width:	
				Depth:	
DECEASED DET	TAILS				
Surname:			_ Given Names:		
Gender: 🗆 Fema	ale 🗆 Male 🗆 Other	Age	_ Date of Birth: _	Date of	Death:
Last Street Addres	s:				
Suburb:			_ State:	Postco	de:
Place of Death:					
Religion (o <i>ptional</i> ):					

□ All implants (pacemakers, electrical devices and radioactive devices) have been removed in accordance with industry standards

Application for Permission to Cremate (Form 1), Permission to Cremate (Form 4) and associated documentation are:

□ Attached □ Not attached, reason why: \_



#### **NEXT OF KIN / OTHER REPRESENTATIVE DETAILS**

Title:	□ Mr	□ Mrs	□ Ms	□ Miss	Relationship to Deceased:		
Surname:					Given Names:		
Postal A	ddress:						
Suburb:					State:	Postcode:	
					Email <i>(optional)</i> :		
APPLIC	CANT/FUNE	RAL DIRECTO	OR DETAILS				
Busines	s Name:						
Postal A	ddress:						
Suburb:					State:	Postcode:	
Contact	Number:				Email:		

#### APPLICANT DECLARATION

I, the undersigned applicant declare:

- a) The information provided is true, correct and complete;
- b) I have the legal right to authorise the application and associated cremation or where applicable, as the Funeral Director I have been given the authority to act on behalf of the person with the aforementioned right;
- c) I have read, understood and agree to the Council's Cemetery and Crematorium Policy which provides conditions on the service requested by this application;
- d) I have read, understood and agree to the Standard Terms and Conditions Boyne Tannum Memorial Parklands Facilities Hire where the service is requested by this application;
- e) Permission is given for Gladstone Regional Council to conduct the cremation of the nominated deceased person;
- f) That applicable fees and charges must be paid in advance of the service. Fees and charges will only be invoiced for later payment with Council's prior agreement. Where a service is cancelled or application not approved by Council, a full or partial refund of fees is at the sole discretion of Council; and
- g) Shall, at all times, hold harmless and keep indemnified the Gladstone Regional Council, its members, employees and agents from and against all actions, suits, proceedings, claims, demands, losses, costs, charges and expenses which may be taken against, made on or suffered by it or any of them directly or indirectly on account of or in respect of or arising out of any act, matter or thing done or omitted to be done by the approval holder or agents or employees or any of them in connection with any activity carried out or purporting to be carried out under the approval provided by Council arising from this application or in the observance, fulfilment, nonobservance or non-fulfilment of any condition of the said approval;

Applicant Signature\_\_\_\_\_

Date



# STANDARD TERMS AND CONDITIONS – BOYNE TANNUM MEMORIAL PARKLANDS FACILITY HIRE

- 1. The chapel is only to be hired for the purpose of a memorial or funeral service.
- 2. The chapel hire is available between 9:00am and 4:00pm unless an extended time frame is requested and approved by Council.
- 3. The standard chapel hire time is two (2) hours, with additional time charged pro-rata in 30 minute intervals.
- 4. The chapel has slideshow facilities including a sound system and televisions. Hirers must bring their own device to operate this equipment. It is the responsibility of the hirer to book an appointment time onsite prior to the service to test the equipment if required.
- 5. The chapel has seating for 136 adults. Up to 40 additional chairs are available by special request.
- 6. The chapel has an organ and is available for use by special request.
- 7. Hire of facilities does not include additional Council staff services. Council staff will set up tables and chairs only.
- 8. Pallbearing by family members is available with hire of the Chapel by special request, pallbearer will not be able to place the coffin/casket within the catafalque.
- 9. The hirer must take all reasonable and practical measures to prevent damage to the chapel and any provided equipment. The facilities must be left in good working order and in a clean and sanitary condition.
- 10. If the facilities require cleaning and/or repairs as a result of the hirer's use, the hirer will be advised of the rectification works to be undertaken and the time in which this must be undertaken. Council will offer the opportunity of a joint onsite inspection to outline the works required.

#### SUBMISSION AND PAYMENT OPTIONS

Applications will not be processed until payment is received by Council.

**IN PERSON** at any of Council's Administration Centres. Cashier hours may vary at each office. General cashier hours are from 8.30am to 4.45pm Monday to Friday.

EMAIL to cemstaff@gladstone.gld.gov.au

POST Gladstone Regional Council, PO BOX 29, GLADSTONE QLD 4680

Cheque or money order made payable to Gladstone Regional Council.

## RECEIPT DETAILS (OFFICE USE ONLY)

Date:

Receipt number:

Amount Paid:

Cashier: