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Office:
Date:/
Time:
Name:

MEMORIAL PLAQUE ON COUNCIL ASSET APPLICATION FORM

Commemorative plaque request to install on Council Park furniture.

Application Guidelines:

- 1. Personal memorial shall only commemorate a person who is no longer living.
- 2. Personal memorial will not be approved for animals.
- 3. Applications must be accompanied with supporting evidence, where the evidence shows:
 - a. Long history within the region;
 - b. Significant contributions have been made to the community; or
 - c. Strong connection with the local government area

Application Type					
☐ New Application; or					
Order replacement plaque – original plaque damaged, stolen or aged; and/or					
Request new location for plaque – asset approved plaque installed to is being removed.					
Applicant Details					
Mr Mrs Ms Dr Dr Other					
Surname:	Given name/s:				
Company:	ABN:				
Phone Number:	Email Address:				
Postal Address:					
Name of person memorial commemorating.					
B) Evidence must be submitted to demonstrate long history within the region, significant contributions or strong connection to the local government area.					
☐ Evidence attached					
Reason why memoriam should be considered:					
C) Are you a family member?					
☐ YES – Details of Relationship:					
Move to Question 4; or					
□ NO – A letter of permission must be submitted from relevant family if the applicant is not a family member.					
☐ Letter attached					
Surname: Company: Phone Number: Postal Address: Person Memorial Commemorating — NEW applications only A) Name of person memorial commemorating: B) Evidence must be submitted to demonstrate long history connection to the local government area. □ Evidence attached Reason why memoriam should be considered: C) Are you a family member? □ YES — Details of Relationship: Move to Question 4; or □ NO — A letter of permission must be submitted from	ABN: Email Address: within the region, significant contributions or strong				



Plaque Wording and	Layout	
☐ New Plaque - Cou	ıncil will supply an aluminium, 200mm wide and 100mm high plaqı	ue. Silver with black text.
☐ Order replaceme	nt plaque (like for like) – original plaque has been stolen, damaged	or due to old age.
☐ Plaque not requir	ed — application to use original plaque as plaque in good condition.	
Provide wording and	layout below; or	Examples:
		In loving memory of Name In loving memory of Name
Proposed Location fo	or installation	
Note: Multiple plaques within the same location – applicants who have previously had a memorial approved plaque installed at a location may request additional plaques be added to the same asset.	Is this application to replace an original plaque in the same location?	
	Alternate Location 1:	
	Alternate Location 2:	





Application Terms and Conditions:

- 1. Council will supply and install plaques to the agreed location, should the application be approved. This is to ensure the correct dimensions of the design construction standard and materials are met. The cost is to be borne by the applicant, via the application fee which must be payable at lodgement.
- 2. Council cannot guarantee that a plaque will remain at the designated site indefinitely or provide a specific life timeframe. Council reserves the right to remove a memorial at its discretion and will provide notification to the applicant within 30 days of removal, should the plaque be removed.
- 3. Should the asset of where the plaque is installed be replaced (like for like asset), the plaque will be re-installed to replacement asset, if the plaque is in good condition, at Councils discretion.
- 4. Should the plaque be removed due to removal of the asset or due to the age/condition of the plaque, applicants will be notified in writing within 30 days of Councils removal. In this instance, applicants may lodge a new application, including payment of the associated fee, requesting:
 - replacement (like of like) plaque to be installed at the same location or secondary location in circumstances where the asset has been removed; or
 - original plaque to be re-installed in secondary location should the original plaque be in good condition, at Councils discretion, due to asset being removed.

Additionally, the applicant may come and collect the plaque should they not wish to lodge a new application.

If the applicant is unable to be contacted or does not respond to Councils 30 day notification, a reminder letter will be issued after 60 days. Old plaques will be disposed of, if no further contact is made with Council following the 60 day notice period.

- 5. Council does not accept responsibility for any loss, damage or removal of plaques. However, one (1) replacement plaque will be supplied by Council in the case of the plaque being stolen or vandalised. Any replacement of subsequent plaques will be via application and payment of associated replacement fee.
- 6. Council does not accept responsibility for allowing installation of a plaque, that incurs a dispute between relatives or the community.
- 7. Plaques will be cleaned, if deemed necessary during scheduled routine maintenance of the location, weather permitting.

Privacy Statement and Applicant Declaration

Privacy Statement:

Gladstone Regional Council is collecting your personal information for the purposes of processing your request and undertaking associated Council functions and services. Council is authorised to collect this information in accordance with the Local Government Act 2009 and associated laws. Your personal information will not be disclosed to third parties without your consent, or, if required to do so by law. This document is subject to the provisions of the Information Privacy Act 2009, Right to Information Act 2009 and the Public Records Act 2002. Your personal information can be accessed and corrected by contacting Gladstone Regional Council on (07) 4970 0700.

Applicant Declaration:

I declare that, to the best of my knowledge, all particulars supplied by me are accurate and complete. I understand that inaccurate or false statements may cause my application to be delayed or refused.

Signature:	Date:		
OFFICE USE ONLY			
CSO:	Date:	Receipt Number:	