



Cremated Remains Authority Form

Interment Reference Number (Office Use Only)

This form must be completed by the interment right holder or a person authorised to exercise the interment right in accordance with Section 35 of the Burial and Cremation Act 2013 (see overleaf). No preparatory activities will occur until all details required on this form have been received.

Deceased details - please enter all details and indicate as applicable (tick)

Title: Dr Mr Ms Mrs Miss Gender: M F

First Name/s: _____ Last Name: _____

Date of Birth: _____ Date of Death: _____ Age: _____

Last Known Address: _____

Suburb: _____ State: _____ Postcode: _____

Funeral/ Memorial Service details

Date: _____ Service location: _____

Service performed by: _____

Interment location - please select ONE ONLY

A Cemetery to allocate new plot (new interment right required)
(Plain English Statement completed and provided to the Authorised Person by Funeral Director)

B Family to select new plot (new interment right required)
Family to contact Council to arrange

Cemetery: _____ Right of Interment Number: _____

Plot Details: _____ Expiry Date: _____

C Existing plot

Name of right holder/s: _____ Right of Interment Number: _____

Plot Details: _____ Expiry Date: _____

Cemetery: _____

Existing Interments at Site? Yes No

Previous Burial Name & Date (if known): _____

Transfer of Right required? Yes No If Original Interment Right holder/s are Deceased this needs to be Yes

Instructions for interment - please enter all details and indicate as applicable (tick)

Placement of Ashes by: Council Family Date interring: _____



Authorised person details - please enter ALL details and indicate as applicable (tick)

Title: Dr Mr Ms Mrs Miss Gender: M F Date of Birth: _____

First Name/s: _____ Last Name: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

Phone _____ Mobile: _____ Email: _____

Relationship to Deceased: _____

I acknowledge that I have read and understand my rights and responsibilities and declare that I am the interment right holder or a person authorised to exercise the interment right in accordance with the conditions listed below.

Authorised Person's Signature: _____ **Date:** _____

Your rights and responsibilities:

New interment right

- If a new interment right is being requested in order to facilitate this burial, the Authorised Person will become the interment right holder and must be supplied with a Plain English Statement by the Funeral Director.
- In signing this Burial Authority, the Authorised Person acknowledges receipt of a Plain English Statement by the Funeral Director if a new interment right is required.
- An interment rights will only be granted to one interment right holder (ie, no interment right will be issued to more than one person)

Authority to exercise the interment right

- Only the interment right holder may exercise an interment right, provided that if the interment right holder is deceased the interment right may be exercised by the personal representative of the deceased interment right holder (by definition the Executor or Administrator of the Deceased Estate) in accordance with section 35 of the Burial and Cremation Act 2013.
- 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 of 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 of uncle;
 - a nephew or niece;
 - a cousin;
 - any other blood relative.