

Notice of Interment

Interment Date: _____ **Interment Day:** _____ **Interment Time:** _____

Type of Interment: Coffin / Crypt / Cremated Remains **File No (if applicable):** _____

Zone: _____ **Section:** _____ **Allotment Number:** _____

Coffin/Casket: (shape) _____ (length) _____ (width) _____ (height) _____

Grave Type (if applicable): New Grave / Open Vacant / Reopen / Triple Depth

Name of Deceased: _____ **Religious Name (if applicable):** _____

Religion/Community: _____ **Clan (if applicable):** _____

Last Residential Address: _____

Suburb: _____ **State:** _____ **Postcode:** _____

Sex: _____ **Marital Status:** _____

DOB: _____ **DOD:** _____ **Religious DOD:** _____ **Age:** _____

Funeral Director (if applicable): _____

Suburb: _____ **State:** _____ **Postcode:** _____

Phone: _____ **Fax:** _____ **Email:** _____

For new allotments, this person/s will become the registered holder/s of the Interment Right

Holder/Applicant 1 Name: _____

Address: _____

Suburb: _____ **State:** _____ **Postcode:** _____

Phone: _____ **Mobile:** _____ **Relationship to deceased:** _____

Holder/Applicant 2 Name: _____

Address: _____

Suburb: _____ **State:** _____ **Postcode:** _____

Phone: _____ **Mobile:** _____ **Relationship to deceased:** _____

I/We certify that the said body should rightly be interred in the said grave. In consideration of the Trustees of the Rookwood General Cemeteries Reserve Trust ("Trustees") permitting the opening of the grave and interment therein of the body of the said deceased. I/We each of us the undersigned, DO HEREBY INDEMINFY AND hold safe and harmless the Trustees in any and every manner whatsoever by reason of the said Trustees having consented to the opening of the grave and the interment therein of the body of the said deceased.

Holder/Applicant Signature: _____ **Date:** _____

Holder/Applicant Signature: _____ **Date:** _____