

## Gingin Cemetery

## **Application for Renewal of Grant of Right of Burial**

Grant Details						
Interment Option:		] Cemetery		□ Niche Wall		
Section:		] Anglican □ N ] Niche Wall	Methodist Uniting	☐ Roman Catholic ☐ Non-Denominational		
Plot/Niche Number:			Grant Number:		Issue Date:	
Applicant Details						
Applicant Full Name						
Address:						
Suburb:				Postcode:		
Telephone:				Email:		
Fees Applicable						
See Shire of Gingin Fees & Charges ( https://www.gingin.wa.gov.au/budget-fees-and-charges )						
Applicant Declaration/Acknowledgement						
<ul> <li>Cemeteries Act 1986 and amendments thereto, which are outside the direct control of the Shire of Gingin after the date of this agreement and relating to the cremation, burial or conduct of funerals charged to and payable to my estate.</li> <li>I will be responsible for the payment of all present and future taxes, duties, assessments and outgoings whatsoever including a goods and services, value added or similar broad based consumption tax, whether statutory or local or of any other description which may be assessed, charged or imposed on or in connection with the provision of the Service, and after the date of my death, my estate will be liable for the payment of any such taxes, duty, charge, assessment and outgoing.</li> <li>If I make a payment for future tax including a goods and services, value added or similar broad based consumption tax, in connection with the provision of the Service, and that tax is not eventually imposed, the Shire of Gingin will refund the value of any such payment to me or my estate.</li> <li>I acknowledge that I can only transfer this Grant of Right of Burial with Shire of Gingin approval and upon payment of the prescribed fee.</li> </ul>						
Applicant Signature:						
Date:						
Office Use Only						
Fee Amount \$		Receipt No.		Receipt	Date	
Grant No. Allocated			Record No.			
Actions Required		☐ Grants Register Updated ☐ Intramaps Updated ☐ Location Map Created ☐ Grant Letter Issued & Coversheeted				