Transfer Interment Right (holder)

Application type

Transfer of perpetual interment right (holder) - \$130

Purpose of this application form:

This application form should be completed by a rights holder that seeks to transfer an interment right to a new holder.

Form approved by Cemeteries & Crematoria NSW under subsection 58(3) of the Cemeteries and Crematoria Act 2013.

This application form is not required for transferring rights between joint holders. On the death of a joint holder of an interment right, the remaining joint holder/s is/are entitled to the interment right. Surviving joint holder/s should advise the cemetery operator of the death of one joint holder so the cemetery operator's register can be updated.

Denomination:

Plot no:

Interment site

Cemetery:

Section:

Interment site type:	Monumental	Colum	nbarium	
This interment site allows for	a maximum	fully body interments;	ash interments.	
Interment sites can usually be dug to a depth to accommodate two coffins and six ashes. However, occasionally, due to rock or stability problems not evident prior to commencement of digging the site, ground conditions may not allo for interment in an allocated plot. In these circumstances an alternate interment site will be allocated.				
Registered holder/s of interment right/s				
Holder 1				
Given name/s:		Surname:		
Street address:				
Suburb:	St	rate:	Postcode:	
Phone: H	W	,	М	
Email:				



Holder 2						
Given name/s:		Surname:				
Street address:						
Suburb:	State:		Postcode:			
Phone: H	W		М			
Email:						
Cemetery operator must sight a copy of the following: Original Right of Burial or Interment Right						
Details of the new Holder/s (Full name, date of birth)						
Proof of identity, Contact details (Address, Phone and Email)						
Note: Additional documentation may be requ	iested					
Cemetery operator's signature:						
Details of new holder/s						
Holder 1						
Given name/s:		Surname:				
Street address:						
Suburb:	State:		Postcode:			
Phone: H	W		М			
Email:						
Holder 2						
Given name/s:		Surname:				
Street address:						
Suburb:	State:		Postcode:			
Phone: H	W		М			
Email:						



Please attach an additional sheet to register more tha two holders.				
Next of kin (any next of kin or othe contact) Name:	r persons nominated by the holder/s as secondary			
Address:				
Phone:	Relationship:			
Signature:				
Proof of identity requiremen	nts (check two forms of ID)			
provide photo identification. These may i	two original identification documents, one of which must nclude a passport, license issued under Australian law led license), birth certificate/citizenship certificate, credit nembership to a registered club.			
Proof of two identity documents sighte	ed holder 1:			
Passport	Drivers Licence			
Birth Certificate	Credit Card			
EFTPOS Card	Medicare Card			
Pension Card	Healthcare Card			
Proof of two identity documents sighted holder 2:				
Passport	Drivers Licence			
Birth Certificate	Credit Card			
EFTPOS Card	Medicare Card			
Pension Card	Healthcare Card			
I of one of the above original forms of identi-	declare that I have sighted fication, provided by below Applicant.			

Date:



Signature of consultant:

Authorisation to transfer interment right

New Interment right holder/s to complete

I/We the undersigned accept the transfer of the Interment Right. I/we, acknowledge that the transfer will not take effect until the transfer fee has been paid, the Cemetery Operator's Register has been updated and I/we have been issued with a Certificate of Interment Right.

Date:
Date:
n interment right if, in the operator's courage dealing in interment rights.
under the <i>Cemeteries & Crematoria Act</i> Vation 2012. This document will form part le in accordance with the <i>Privacy and</i> Int Information (Public Access) Act 2009. being allocated. Council will take all a from misuse, unauthorised access and raperiod that is an accordance with the
Receipt No:

