Phone 0800 965 468

CUSTOMER SERVICES

Application to Purchase a Cemetery Plot

Cemetery		\square Immediate use	☐ Pre-purchase
Plot requirements			
Туре			
\square Casket \square Ash \square Adult \square Child			
☐ Single interment ☐ Double interment			
Other specifications:			
Application details The Burial Deed will be issued in the name of this pers	on (the person who i	s to have the right of i	nterment).
Full name:			
Address:			
Phone number:	Email:		
Authorisation			
Person arranging the purchase of this plot			
I am the person arranging this transaction. I declare tha will be responsible for paying the fees set by Waimakari exclusive right to inter the individual(s) named below in	ri District Council in o	consideration of being	granted an
Funeral Director (Company):			
Name:			
Address:			
Phone number:	Email:		
Signature:	Date:		
PLEASE NOTE - A signature is not required if you submit this form e giving your authority for this application to proceed.	lectronically. By entering y	our name in the signature fie	eld above you are

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Parties to hold Right of Interment First party Surname: First names: Address: _____ Date of birth: **Second party** Surname: __ First names: Address: Date of birth: _____

Cemetery administration			
Plot details: Record number:			
Reserve plot record: \square Recorded electronically \square Deed issued (certificate of purchase)			
Plot Fees: ☐ Burial Plot: \$750.20 ☐ Ashes Plot: \$201.30			
☐ Record Fee: \$48.25			
Total Charged: Receipt number:			
Declaration by authorised officer I hereby certify that the above plot has been purchased for exclusive right of interment by the applicant and that this has been accurately recorded in the cemeteries database.			
Signature: Date:			
Notes:			