

215 High Street Private Bag 1005 RANGIORA 7440 New Zealand Phone: (03) 311 8900 or: (03) 327 6834 Fax: (03) 313 4432 www.waimakariri.govt.nz

APPLICATION TO VARY CEMETERY DEED

The existing Deed Holder to the cemetery plot wishes to transfer the Deed to another person, or back to the Waimakariri District Council. The existing Deed Holder is deceased and the next of kin or person acting on behalf of the deceased or estate wishes to arrange for transfer of the Deed. The existing Deed Holder wishes to change the parties named as holding the Right of Interment in the plot. Plot Information Cemetery	Reason for Request (tick more than one if appropriate)	
deceased or estate wishes to arrange for transfer of the Deed. The existing Deed Holder wishes to change the parties named as holding the Right of Interment in the plot. Plot Information Cemetery Plot Identification Number		· · · · · · · · · · · · · · · · · · ·
Plot Information Cemetery Plot Identification Number Name of Current Deed Holder New Deed Holder (complete if relevant) Name of Person to whom the Deed is to transfer Address Phone Contact Status: Next of kin to Deed Holder Executor of will or estate of existing Deed Holder Other (state relationship with Deed Holder) Parties to Hold Right of Interment (complete if relevant) Surname First Names Address		· · · · · · · · · · · · · · · · · · ·
Cemetery		· · · · · · · · · · · · · · · · · · ·
Plot Identification Number Name of Current Deed Holder New Deed Holder (complete if relevant) Name of Person to whom the Deed is to transfer Address Phone Contact Status:	Plot Info	rmation
New Deed Holder (complete if relevant) Name of Person to whom the Deed is to transfer	Cemetery	
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Status: Next of kin to Deed Holder	Address _	
Executor of will or estate of existing Deed Holder Other (state relationship with Deed Holder) Parties to Hold Right of Interment (complete if relevant) Surname First Names Address	Phone Co	ntact
Other (state relationship with Deed Holder) Parties to Hold Right of Interment (complete if relevant) Surname First Names Address	Status:	☐ Next of kin to Deed Holder
Parties to Hold Right of Interment (complete if relevant) Surname First Names Address		☐ Executor of will or estate of existing Deed Holder
Surname First Names Address		Other (state relationship with Deed Holder)
Surname First Names Address		
Address	Parties t	o Hold Right of Interment (complete if relevant)
	Surname	First Names
	Address	
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Applicant's Declaration

I am the person making this variation. I declare that the information given on this form is correct and that I am properly authorised by all interested parties* to execute the variation requested in this application. Name Phone Contact Existing Deed Holder Status: Next of kin to Deed Holder Executor of will or estate of existing Deed Holder Other (state relationship with Deed Holder) Signature Date * Interested parties includes the next of kin and all of the close living relatives. **Approval** I hereby certify that this application has been approved and that records have been updated in accordance with the instructions set out on this form. Signature (Authorised Officer) ______ Date _____ Notes (Record any significant issues) Office Use (tick as complete) New Deed Generated

Cemetery Database updated

Confirmation to applicant

Signed (Administration Officer)