



TENTERFIELD SHIRE COUNCIL
PO Box 214
247 Rouse Street
TENTERFIELD NSW 2372
Phone 02 67 36 6000

Email: council@tenterfield.nsw.gov.au

APPLICATION FOR PERMISSION TO ERECT A HEADSTONE/MONUMENT

All Monumental work must follow AS4204:2019 Headstones and Cemetery Monuments guideline. Any works that have not been approved or not in line with the relevant Australian Standards may be removed by Council Staff.

MONUMENTAL MASON: _____

DECEASED DETAILS:

SURNAME: _____ GIVEN NAMES: _____

Interment Right Holder Authorisation (This person must be the right Holder or have written authority from the right holder)

Mr/Mrs/Miss/Ms (please complete all details)

Given Name: _____ Surname: _____

Address: _____

Town/Suburb: _____ Postcode: _____ Phone: _____

Relationship to Deceased: _____

Signature of Interment Right Holder: _____

CEMETERY LOCATION

Premises

Tenterfield

- ☐ Old Section ☐ Lawn ☐ Niche-Memorial Wall
☐ Lawn Memorial Niche Wall ☐ Niche Fred Pavel Memorial Wall

- ☐ **Torrington** ☐ **Stannum** ☐ **Drake** ☐ **Legume** ☐ **Urbenville**
☐ Lawn Section ☐ Memorial Wall

DESCRIPTION OF SITE

Plot No. _____

Row _____

Section of Cemetery _____

| | | | |
|-----------------|------|------|---------|
| Office Use Only | | | |
| CEMETERY | NAME | Paid | Receipt |