

Cemetery Research Application

Research or General Enquiry

Crown Lands Management Act 2016
NSW Public Health Regulation (Disposal of Bodies) 2012
Cemeteries and Crematoria Act 2013 and Cemeteries and Crematorium Code of Practice 2018

CEMAD1

Rules and Conditions of Application

Payment for research must be paid prior to the research being undertaken. The cost will be determined by the number of records to search and the estimated length of time to search historic records. You will be invoiced for this.

Timeframes will vary dependent upon the age and location of the record.

Results are from several databases including old historic records which may NOT yield any results.

Research will commence after payment has been received and when cemetery operations allow for the research to be undertaken.

Information provided will be of a general nature only. No sensitive information will be released.

This application must be completed in full and signed in order to be actioned.

Complete section A1, A2 and A4 if your query is of a General nature.

Complete section A1, A3 and A4 if your query is in relation to researching family members

A1. Applicant / Grantee Details – Mr / Mrs / Ms / Other _____

| | | | |
|--------|----------------------|-----------|----------------------|
| Name | <input type="text"/> | Surname | <input type="text"/> |
| Street | <input type="text"/> | | |
| Suburb | <input type="text"/> | State | <input type="text"/> |
| | | Post Code | <input type="text"/> |
| Email | <input type="text"/> | | |

A2. General Enquiry / Research

Please provide as much clarity and information as possible for your request.

*Attach separately if additional space is required.

A3. Deceased Details

Record 1

| | | | |
|---------------|----------------------|---------------------------------|--|
| Surname | <input type="text"/> | | |
| Given Name/s | <input type="text"/> | | |
| Date of Birth | <input type="text"/> | Date of Death | <input type="text"/> |
| Cemetery | <input type="text"/> | <input type="checkbox"/> Burial | <input type="checkbox"/> Ash Interment |

Record 2

| | | | |
|---------------|----------------------|---------------------------------|--|
| Surname | <input type="text"/> | | |
| Given Name/s | <input type="text"/> | | |
| Date of Birth | <input type="text"/> | Date of Death | <input type="text"/> |
| Cemetery | <input type="text"/> | <input type="checkbox"/> Burial | <input type="checkbox"/> Ash Interment |

Record 3

| | | | |
|---------------|----------------------|---------------------------------|--|
| Surname | <input type="text"/> | | |
| Given Name/s | <input type="text"/> | | |
| Date of Birth | <input type="text"/> | Date of Death | <input type="text"/> |
| Cemetery | <input type="text"/> | <input type="checkbox"/> Burial | <input type="checkbox"/> Ash Interment |

Record 4

| | | | |
|---------------|----------------------|---------------------------------|--|
| Surname | <input type="text"/> | | |
| Given Name/s | <input type="text"/> | | |
| Date of Birth | <input type="text"/> | Date of Death | <input type="text"/> |
| Cemetery | <input type="text"/> | <input type="checkbox"/> Burial | <input type="checkbox"/> Ash Interment |

* Attach separate document for additional records.

A4. Applicant Declaration

I acknowledge that by signing this declaration I have read and understood the Conditions and Rules and am in agreement to them or any future changes to the terms. I agree to pay the invoice related to this application prior to any research being undertaken. I hereby agree to the Rules and Conditions for Tweed Shire Council to undertake this research.

| | | | |
|--|----------------------|-------------|----------------------|
| Applicants Name (please print) | <input type="text"/> | | |
| Applicants Signature | <input type="text"/> | Date | <input type="text"/> |