

Application for Monument Installation

1.	Name of cemetery:				
2.	Details of Installer:				
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	Installer's name:				
	Company name:				
	Postal address:				
	Phone:	Mobile Phone:	Fax:		
	Qualifications:				
3.	Details of Plot Locatio	n: of the Late:			
	Plot owner:				
	Block No:	Row no:	Plot no:		
	Note: Will the monument, when sited, cross more than one plot? □ No – Go onto Section 4 □ Yes – List other affected plots:				
	Name of Applicant:				
	Relationship to deceased:				
	Next of kin:	☐ Yes ☐ No			
	(if not next of kin please provide documentation (Family tree) and written approval from next of kin)				
	Address:				
	Home Telephone:		Mobile:		
	Email:				
	Date:				



4. Installation and Design Requirements

There are several installation and design requirements that are applicable to all cemeteries. Please read the following details carefully to ensure you will be allowed to install your monument:

- A maximum building envelope applies to the installation and design of headstones. (Please refer to your copy of requirements for the specific building envelope of your proposed cemetery).
- The headstone is to be no higher than 1200mm (excluding Oamaru Lawn Cemetery where the maximum height is 1000mm), and shall be no wider than the width of the plot.

5.	Details of Monument to be Installed			
	Materials:			
	Dimensions: Please add the relevant dimensions of your planning monument to the diagram below. For plaques being mounted on a plinth, please provide plinth details.			
	Please sketch here			



Proposed Plaque Inscription:	
I hereby declare that all monumental masonry work will be completed in accordance NZS 4242:2018 (Headstone and Cemetery Monuments). I hereby give permission for the erection of the work mentioned above, and in consideration of Copermitting the execution of such work on the above plot, I the undersigned DO HEREBY INDEM and hold safe and harmless the Council against all actions, proceedings, claims, demands, dama costs, losses and expenses whatsoever which may be made on or instituted against or suffered b Council in any manner whatsoever by reason of the Council having consented to the execution of work.	ouncil INIFY ages, by the
Signature: Date:	
Office Use Only	
Date Received Document no:	
Approved: Yes / No	