

APPLICATION FOR GRAVE SPACE

NEW GRAVE SPACE		
Purchasers Name/s:		
Address:		
Home Tel Number/s :		
Mobile Tel Number/s:		
SECTION BELOW COMPLETED BY OFFICE:		
Receipt Number:		
Grave Details:	Section:	Grave Number:
Deed Number:		

As owner of the above mentioned burial plot, I confirm that the details given are correct

Signature of Applicant/s _____ Date _____