Hay Shire Council 134 Lachlan Street HAY NSW 2711 Telephone: (02) 6990 1100

Fax: (02) 6993 1288 www.hay.nsw.gov.au

Document ID:



Application for Burial Permit

	Cemete	ery: Hay	Booligal		
Name of Dece	ased:(Surname	1		(Other Names)	
Occupation of	Deceased:	,		,	
Late Residence of Deceased:					
	·				
			Hour:		
	Church Gra				
Туре:	New Tradi	tional Lawr			
	Reopening Tradi			S	
	Section:	Row:	Lot:	No. of Order:	
Casket:	Small Norma	l 🗌 Oversize	Size:		
Name of Applicants: Mr/Mrs/Miss					
Address of Applicant:					
Relationship (if known) to Deceased:					
Does Applicant Hold Right of Burial?No.:No.:					
••	• -				
Undertaker:		Si	gned:		
_					
Date:					
				Rof.	
, u.u				nej	
Approved: Director		Date Approved:	Status	: Approved	Version: 001

Page: 1 of 1