

Application to Install Cemetery Memorial



Application Details

Primary applicant name	
Address/ City/Town	
Telephone Number (include area code)	E-mail Address

Cemetery Plot Details

Name of Cemetery		
Section	Block	Plot
The original plot purchaser/s are authorised to apply to have a memorial intalled. Are you the original plot purchaser/s? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Signature 1	Date (DD/MM/YYYY)	
Signature 2	Date (DD/MM/YYYY)	

IF NOT the plot purchaser/s

*Installation authorised by all Executors of original plot purchaser/s Estate YES NO

OR

*Installation authorised by all Trustees of original plot purchaser/s Estate YES NO

If you are not the original plot purchaser/s, statutory declarations are required for the above.

If NO is answered to any of the above, please contact Council for further advice.

Deceased Details


Deceased person 1

Surname
Given Name(s)
Date of Death

Deceased person 2

Surname
Given Name(s)
Date of Death

Work to be Completed

Please supply any relevant information with your application 

Please tick ✓ the applicable box (only TCDC Approved Contractors may undertake the installation of headstone/plaques).

Install:
Headstone/Plaque

Replace:
Headstone/Plaque

Restoration/
Refurbishment

Inscription only

Proposed date for work to commence _____

Please tick ✓

This memorial has been designed in accordance with conditions listed on the Thames-Coromandel District Council website and will be installed in accordance with NZS4242: 2018 New Zealand Standard for Headstones and Cemetery Monuments.



A diagram of the proposed memorial showing the dimensions and design of the memorial (including front, side and rear elevations) and a list of material components, including dowels.



Supply size of dowels and include placement of dowels on the memorial diagram.



Please tick ✓

Following installation, the monumental mason agrees to supply an image showing the use of dowels during installation.



A list of all inscriptions and their position on the proposed memorial.



To Provide Council with 10 working days notice before installation.



Image to be supplied on completion of installation of Memorial.



Council Approved Installer

Name _____

1. Download and open this form in your PDF reader (eg Adobe Acrobat). 2. Fill it in and save. 3. Press 'Submit Form'. Your email application (eg Gmail) will open with the form attached and the email pre-addressed to TCDC. If not, attach the form to an email to customer.services@tcdc.govt.nz. **4. You will receive a reply saying the form has been submitted.**