



Shire of Williams Williams

Application for Placement of Ashes in Niche Wall (Clause 14)

FORM OF INSTRUCTIONS FOR NICHE WALL AND APPLICATION FOR ORDER OF PLACEMENT OF ASHES

1. Name of deceased _____
2. Late residence of deceased _____
3. Occupation of deceased _____
4. Age/Date of Birth _____
5. Birth place of deceased _____
6. Date of death _____
7. Day of cremation _____
8. Number of niche / compartment on plan issued _____
9. Single or Double _____
10. First or second interment _____
11. Niche wall _____
12. Right of Burial exists (name, date) _____
13. Right of Burial is required (name, address) _____

Signature of (Applicant)

Funeral Application Approval:

Application received this _____ day of _____ 20____ at _____ o'clock.

Application approved by the Shire of Williams on this _____ day of _____ 20____.

Signed: _____

(CEO)