

# Purchase an exclusive right of interment

Use this form to purchase a plot.

Cemetery:	<input type="checkbox"/> Karori	<input type="checkbox"/> Makara
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Plot requirements				
<input type="checkbox"/> Casket	<input type="checkbox"/> Ash	<input type="checkbox"/> Memorial		
<input type="checkbox"/> Adult	<input type="checkbox"/> Stillborn	<input type="checkbox"/> Child up to 12 years	<input type="checkbox"/> Children's marked	
Depth:	<input type="checkbox"/> Single	<input type="checkbox"/> Double	<input type="checkbox"/> Triple	
Karori:	<input type="checkbox"/> Niche	<input type="checkbox"/> Seaforth Garden		
Makara:	<input type="checkbox"/> Ash Beam	<input type="checkbox"/> Ash Circle	<input type="checkbox"/> Children's Lawn	<input type="checkbox"/> Plaque Lawn
<input type="checkbox"/> Denominational ( <i>specify</i> )				
Other specifications:				

Grave decorations
Decorations may be placed on the concrete beam next to the headstone or plaque but not the grass area in front of, or behind the plot, as we need to maintain and mow these areas. Decorations on the lawn will be removed.

Applicant's details
The <i>Exclusive Right of Burial Deed</i> will be in this person's name.
Full name:
Email:
Address:
Phone number/s:

Authorisation ( <i>person or company arranging to purchase this plot</i> )	
I am the person arranging this transaction. I declare that the information given on this form is correct. I/the company will be responsible for paying the Wellington City Council fees for being granted an exclusive right to inter the individual(s) named below in the plot allocated by Wellington City Council.	
Funeral director and company, or family:	
Name:	
Email:	
Address:	
Phone number/s:	
Signature:	Date:

<b>Parties with right of interment</b>		
Person to be buried in this plot		
Surname:		
First name/s:		
Address:		
Date of birth:		
Person to be buried in this plot		
Surname:		
First name/s:		
Address:		
Date of birth:		

<b>Cemetery administration</b>		
Number:	Path:	Section:
Number:	Path:	Section:
Reserve plot recorded:	<input type="checkbox"/> Electronically	<input type="checkbox"/> Manually

<b>Business Support Officer declaration</b>	
I certify that the applicant has purchased the above plot for the exclusive right of interment and that this has been accurately recorded in our administration system.	
Signature:	Date:
Notes: <i>(record any variances or significant issues)</i>	

Scan and email to [cemeteries@wcc.govt.nz](mailto:cemeteries@wcc.govt.nz)  
 Post or drop to **Karori Cemetery, 76 Old Karori Road, Wellington 6012**  
 Phone **04 476 6109**