

Application for permit to work in cemetery

Party interred	
1. Family name:	First names:
2. Family names:	First names:

Plot requirements			
This must be provided to be verified by Wellington City Council Cemeteries and Crematorium staff			
Cemetery:			
Plot identification:	Number:	Row/Section/Garden:	Section:
Temporary grave marker in place: <input type="checkbox"/> Yes <input type="checkbox"/> No			

Nominated contractor	
Name of company:	
Address of company:	
Name:	Telephone:

Scope of work			
Tick relevant boxes and provide additional details as necessary			
Create enclosure	Remove headstone	Remove plaque	Remove panel
Reinstate floor	Place headstone	Place plaque	Place panel
H.P. Cleaning	Other repair:		

Dimensions (new monument or other structure)	
Memorial length x width:	Enclosure length x width:
Please contact the Karori cemetery office for further memorial dimension information.	

Denominational sections standard base size ((S) = single, (D) = double)	
Ash Beam 900 x 430 (S)	Jewish Orthodox 900 x 430 (S), 1800 x 430 (D)
Ash Circle 350 x 250	Lawn Plaque 350 x 250
Assyrian 900 x 430 (S)	Memorial Plaque (bronze) 135 x 95
Chinese 900 x 430 (S), 1800 x 430 (D)	Muslim 350 x 250
Granite Book Plaque 110 x 70 x 15	Pacific Island 900 x 430
Greek Orthodox 900 x 430 (S), 1800 x 430 (D)	Plaque other
Greek Orthodox2 900 x 430 (S), 1800 x 430 (D)	Plymouth Brethen 900 x 430
Hindu 900 x 430	Poon Fah 900 x 430 (S), 1800 x 430 (D)
Prog Jewish 350 x 250	Roman Catholic3 900 x 430 (S) 1800 x 430 (D)
Public1 900 x 430 (S), 1800 x 430 (D)	Rose Garden Plaque 200 x 125

Public2 900 x 430 (S), 1800 x 430 (D)	Serbian Orthodox 900 x 430
Public3 900 x 430 (S), 1800 x 430 (D)	Seyip 900 x 430 (S), 1800 x 430 (D)
Recumbent Desks 500 x 300	Tung Jung 900 x 430 (S), 1800 x 430 (D)
Roman Catholic1 900 x 430 (S), 1800 x 430 (D)	Urupa 900 x 430 (S), 1800 x 430 (D)
Roman Catholic2 900 x 430 (S) 1800 x 430 (D)	

Detail including any inscriptions *(please provide a comprehensive description of work)*

Authorisation

I am the person arranging this permit. I declare that the information given on this form is correct. I/the company will be responsible for paying the permit fees and other related fees set by the Wellington City Council in consideration of being granted the permit.

Funeral Director (Company):

Name:

Email:

Address:

Phone number/s:

Signature:

Date:

Business Support Officer approval

Approved for issue of Permit subject to the specific instructions set out in the section below and the relevant provisions of the Wellington City Council Cemetery Bylaws. Please refer to Wellington City Council Cemetery and Crematorium users guide.

Signature:

Audit tab checked

Date:

Instructions

To be completed by the Business Support Officer. The following instructions apply to this activity. Compliance with stated instructions is mandatory.