

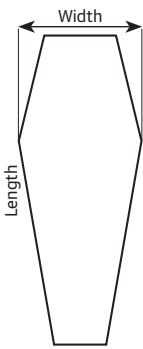
# Burial booking form - Ash or casket

Use this form to book a burial. You may also need an Exclusive right of burial form to purchase a plot space.

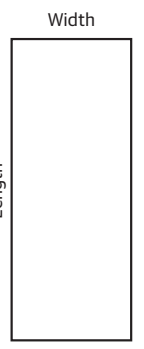
Deceased	
Family name:	
First name/s on the Death Certificate:	
Preferred name: <i>(For a temporary grave marker, if relevant)</i>	
Last address:	
Date of birth:	Date of death:
Gender:	Religion: <i>(if applicable)</i>

Plot requirements	
Burial Type:	<input type="checkbox"/> Casket                 Ash: <input type="checkbox"/> Attended by family <input type="checkbox"/> Unattended
Cemetery:	<input type="checkbox"/> Karori <input type="checkbox"/> Makara
<input type="checkbox"/> First interment	<input type="checkbox"/> Exclusive right of interment application attached
<input type="checkbox"/> Pre-purchased plot held	Details:
<input type="checkbox"/> Second or subsequent interment	Details:

Interment instructions			
Date of interment:	Time of interment:	am/pm	
Casket type: <i>(if applicable)</i>	<input type="checkbox"/> Shaped <input type="checkbox"/> Folding handles	<input type="checkbox"/> Oblong <input type="checkbox"/> Fixed handles, width:	
Casket or urn dimensions: <i>(must be provided)</i>	Length:	Width:	
Lease a temporary grave marker: <i>(maximum time 13 months)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Stipulate side for multiple plots:	<input type="checkbox"/> Left <input type="checkbox"/> North	<input type="checkbox"/> Centre <input type="checkbox"/> South	<input type="checkbox"/> Right <input type="checkbox"/> East <input type="checkbox"/> West
Accessories:	<input type="checkbox"/> Mats <input type="checkbox"/> Lowering device	<input type="checkbox"/> Boards/bearers <input type="checkbox"/> Dirt box and trowel	
Other instructions:			



Shaped



Oblong

Provide external measurements  
Exact measurements please,  
and exclude handles.

## Names of previously buried

Surname: First name:

Surname: First name:

## Authorisation

I am the person arranging this burial. I declare that the information given on this form is correct. I/the company will be responsible for paying the interment fees and all Wellington City Council fees for being granted the right to bury.

Funeral director and company, or family:

Name:

Email:

Address:

Phone number/s:

Signature:

Date:

## 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 lawns will be removed.

## Business Support Officer declaration

Number:

Path/row/garden:

Section:

I hereby certify that the body of:

was buried on:

according to the instructions on this form.

Digitally mapped:

Signature:

Date:

Notes: *(record any variances or significant issues)*

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**