

FORM 6 – Application to Construct/ Modify/ Repair a Cemetery Monument

Stonemason / Builder (Applicant details)			
Name			
Postal Address			
Contact Number			
E-Mail			
Burial Rights Holder or Authorised Person Details			
Name			
Postal Address			
Contact number email address			
Relationship to Deceased:			
Applicant Signature (Burial Rights Holder or Authorised Person)			
Date: ____ / ____ / ____			
Privacy statement Council of the City of Gold Coast (the City) is collecting your personal information in order to provide the services requested, perform associated functions and services, and to update and maintain the City's customer information records. Your information is handled in accordance with the Information Privacy Act (Qld) 2009 and may only be accessed by Councillors, The City's employees and authorised contractors. Unless authorised or required by law, we will not provide your personal information to any other person or agency. For further information go to cityofgoldcoast.com.au/privacy			
Gravesite Details			
Name of Deceased			
Cemetery/Section/Grave Number			
Grave Size	2400 mm x 1200 mm		
Depth	Single / Double / Triple		
Reopen: If site is to be reopened, the front wall must be lower than 450mm.	Yes / No		
Monument details			
New Monument (AS4204:2019)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Vault (AS 4425:2020)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/> Above ground <input type="checkbox"/> In ground
Existing Monument	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Details of Epitaph or Inscription – See attached proof			
Estimated Start/Completion date of Project Note: Proposed start date should be at least one (1) week later than the date of application. In urgent cases please contact the Supervisor Cemetery Operations. In <u>no</u> case may construction be started before a written permit is issued.			
Estimated Start Date:			
Estimated Completion Date:			

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Application / Plan Details	
Item	Requirement
Plan of monument submitted together with City's Permit Fee	Please submit plan and application fee with application Note: Monuments with dimensions exceeding the grave size will <i>not</i> be approved, unless its purpose is to cover more than one gravesite
	Plans and documents to include details on: <ul style="list-style-type: none"> • Footing Depth/Walls • Piers (if required) • Steel Reinforcement • Concrete Pour • Veneer Thickness • Rebate Detail • Dowels and Cramps
Clean-up Please tick as applicable. If left blank, the first option will apply.	Upon completion of works <ul style="list-style-type: none"> <input type="checkbox"/> I will leave excavated soil and other waste such as excess concrete at the designated storage area of the cemetery. An additional fee of \$55.00 per gravesite will apply. <input type="checkbox"/> I will remove all waste from the cemetery after completion of works.

I hereby certify that the monument will be constructed/modified/repared in accordance with Relevant Australian Standards and Codes or Acts

And I will ensure the following:

Compliance with WHS legislation

A risk assessment is completed and management plan developed and implemented

Safe Work Method Statements for High Risk Tasks are developed and implemented, ensuring a safe site during works for workers and community members

Stonemason/Builder Signature

_____/_____/_____
Date

City of Gold Coast, Cemeteries Administration
PO Box 5042, Gold Coast Mail Centre Qld 9726
Phone: (07) 5581 6640
Email: cemeteries@goldcoast.qld.gov.au

NOTE: On approval of this application a permit will be issued. On receipt of the permit works may start on site