

Transfer of Interment Right by Holder

Purpose of this application form:

This application form should be completed by a rights holder that seeks to transfer an interment right to a new holder.

Form approved by Cemeteries & Crematoria NSW under subsection 58(3) of the *Cemeteries and Crematoria Act 2013*.

This application form is not required for transferring rights between joint holders. On the death of a joint holder of an interment right, the remaining joint holder/s is/are entitled to the interment right. Surviving joint holder/s should advise the cemetery of the death of one joint holder so the cemetery operator's register can be updated.

REGISTERED HOLDER DETAILS

☐ Mr ☐ Mrs ☐ Miss ☐ Ms Given Name: Surname:

Address:

Suburb: State: Postcode:

Phone: (H) (W) (M)

Email:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms Given Name: Surname:

Address:

Suburb: State: Postcode:

Phone: (H) (W) (M)

Email:

Additional sheet to be attached if more than two Holders are to be registered

Proof of Identity

Holders must produce two (2) original identification documents, one (1) of which must include photo identification. This may include a passport, birth certificate/citizenship certificate, licence issued under Australian law (drivers licence or other government issued licence) credit card, EFTPOS card or Medicare card. All documents must contain the Holder's name with one (1) also including a photo.

☐ ID Documents attached

LOCATION OF SITE AT LIVERPOOL CEMETERY

Area:

Number:

INTERMENT SITE TYPE

☐ Below Ground Burial

☐ Above Ground Burial

☐ Cremated Remains

☐ Natural Burial - Renewable
Interment Right

☐ Lawn Grave

☐ Monumental Lawn Grave

☐ Monumental Section Grave

☐ Niche

☐ Crypt

☐ Vault

NUMBER AND NATURE OF INTERMENTS

The Rights of Interment granted pursuant to this Agreement are Perpetual Rights of Interment.

This Site allows for a minimum
of full body Interments

This Site allows for a maximum
cremated remains/ash Interments

DETAILS OF NEW HOLDER/S

☐ Mr ☐ Mrs ☐ Miss ☐ Ms

Given Name:

Surname:

Address:

Suburb:

State:

Postcode:

Phone: (H)

(W)

(M)

Email:

☐ Mr ☐ Mrs ☐ Miss ☐ Ms

Given Name:

Surname:

Address:

Suburb:

State:

Postcode:

Phone: (H)

(W)

(M)

Email:

Additional sheet to be attached if more than two Holders are to be registered

SECONDARY CONTACT/NEXT OF KIN

☐ Mr ☐ Mrs ☐ Miss ☐ Ms

Given Name:

Surname:

Address:

Suburb:

State:

Postcode:

Phone: (H)

(W)

(M)

Email:

Additional sheet to be attached if more than one secondary contact is to be registered

PERSONS WHOSE REMAINS MAY BE INTERRED IN THE SITE

Name(s) of person(s) whose remains may be interred in the Site:

1		6	
2		7	
3		8	
4		9	
5		10	

<p>OR The class of persons (related to the Holder(s)) whose remains may be interred in the Site (you may select one (1) class:</p> <p> <input type="radio"/> Spouse <input type="radio"/> Children <input type="radio"/> Parents <input type="radio"/> Grandchildren <input type="radio"/> Grandparents <input type="radio"/> Siblings </p>	<p>OR Name of person who may nominate (at a future time) the person(s) whose remains may be interred in the Site:</p> <p>Given Name:</p> <div style="border: 1px solid black; height: 25px; width: 150px;"></div> <p>Surname:</p> <div style="border: 1px solid black; height: 25px; width: 150px;"></div>	<p>OR The class of persons who may nominate (at a future time) the person(s) whose remains may be interred in the Site (you may only select one (1) class):</p> <p> <input type="radio"/> Spouse <input type="radio"/> Children <input type="radio"/> Parents <input type="radio"/> Grandchildren <input type="radio"/> Grandparents <input type="radio"/> Siblings </p>
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Please note: Subject to clauses 3(e) and 3(f), unless the Holder (or any person or class of persons referred to above who have a right to nominate) provides written notice to CMCT to the contrary, the person(s) or class of person(s) nominated above (or nominated at any time in the future) have the right to be interred in the Site, notwithstanding any changes in circumstances that occur after this Agreement is signed or after the nomination is made (for example, relationship breakdowns).

The onus remains on the Holder (or any person or class of person(s) referred to above who have a right to nominate) to notify CMCT in writing of any changes to the nominations above (or any nominations which are made in the future).

The Holder will also need to notify CMCT in writing of any changes the Holder wishes to make to any person or class of person(s) referred to above who have a right to nominate.

AUTHORISATION TO TRANSFER INTERMENT RIGHT

Registered holder/s to complete

I/We the undersigned as the registered holder/s of the Interment Right, hereby transfer my/our interest in the Interment Right and request that the cemetery operator re-register the Interment Right in the name/s of the new holder/s in accordance with the provisions of the *Cemeteries and Crematoria Act 2013*.

Signature:

Date:

x	
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Name of registered Holder:

Signature:

Date:

x	
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Name of registered Holder:

Please attach an additional sheet if more than two Holders are registered

New Interment Right holder/s to complete

I/We the undersigned accept the transfer of the Interment Right. I/We, acknowledge that the transfer will not take effect until the transfer fee has been paid, the Cemetery Operator's Register has been updated and I/We have been issued with a Certificate of Interment Right.

Signature:

Date:

X

Name of registered Holder:

Signature:

Date:

X

Name of registered Holder:

Please attach an additional sheet if more than two Holders are registered

NOTE: The cemetery operator may refuse to grant or transfer an interment right if, in the operator's opinion, the transfer would tend to create a monopoly or encourage dealing in interment rights.

Cemeteries and Crematoria Act 2013

PRIVACY DECLARATION

Information collected on this form is held in accordance with the *Privacy and Personal Information Protection Act 1998*. Personal information is collected for a lawful purpose that directly relates to our primary function of providing cemetery/cremation services in accordance with the *Cemeteries and Crematoria Act 2013*. We will not collect any more information than is necessary to fulfill these functions. Except as necessary to carry out these functions, we will not disclose your personal information to anyone without your consent unless legally required to do so. We will take all reasonable steps to protect the security of any personal information held, be it stored in electronic or hard copy format. You may request access to your personal information held by us, except in the circumstances set out in Part 2, Division 3 of the *Privacy and Personal Information Protection Act 1998*.

NEXT STEPS

1. Check that you have completed all parts of the form
2. Attach copies of ID documents for both the original and new holder/s
3. Check that both the original and new holder/s have signed and dated this form
3. Make sure that payment is attached to the form or brought with you if paying in person

RETURNING YOUR FORM

You can return this form, any supporting documents and payment:

1. By post to:

Liverpool Cemetery

Po BOX 4676

CASULA MALL NSW 2170

2. In person at our office

207 Moore Street

Liverpool NSW