**PUBLIC CEMETERY BURIAL REQUEST**

Email: [admin@kaikoura.govt.nz](mailto:admin@kaikoura.govt.nz) Phone: 03 319 5026 Post: PO Box 6, Kaikoura, 7300

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| --- | --- | --- | --- | --- | --- |
| **Deceased Details:** | | | | | |
| Surname: | | | | | |
| First Names: | | | | | |
| Last Known Address: | | | | | |
| Date of Death: | Place of Death: | | Age: | | Date of Birth: |
| Place of Birth: | | Sex: | | Occupation: | |
| **RSA / Service Personal Information:** | | | | | |
| Service No: | Rank: | | Field of Ops: | | Years of Service: |
| **Next of Kin Details:** | | | | | |
| Surname: | | | First Names: | | |
| Address: | | | | | |
| Phone: | Mobile: | | Email: | | Relationship: |
| Signature: | | | | | |
| **Interment Information:** | | | | | |
| Compartment: | Row: | | Plot: | | Officiant: |
| Day: | Date: | | Time: | | Depth: Single / Double |
| Ashes / Coffin | | | Family Attending: Yes / No | | |
| Shape: | Handles: | | Length: | | Width (Inc Handles): |
| **Funeral Director Details:** | | | | | |
| Funeral Director (Name) Attending: | | | | | |
| Funeral Company: | | | | | |
| Invoice to be sent to: | | | | | |
| **Council Use Only:** | | | | | |
| Plot: $ | Interment: $ | | Other Fees: $ | | Total: $ |
| PO #: | Invoice #: | | Recording Officer: | | Date: |

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| **FEES AND CHARGES – all charges include GST** | | |
| Plot / Reserve Fee | ⃝ Lawn  ⃝ Ashes  ⃝ RSA | $1,350.00  $600.00  Free |
| Preparation of Plot (includes extra depth)  Child under 15 | ⃝ Lawn  ⃝ Ashes  ⃝ Lawn | $1650.00  $600.00  $990.00 |
| Weekend or Stat Holiday Burial (additional Fee) | | $350.00 |
| **Total (includes GST)** | | **$** |