## Instruction for Placement of Ashes – Niche Wall



## Cemeteries Act 1986, Cemeteries Local Law

Details of Applicant			
Name of Applicant (Grantee)			
Street Address			
Postal Address			
Contact Number/s			
Email			
Relationship to Deceased			
Details of Deceased			
Full Name of Deceased			
Date of Birth			
Date of Death		Age	
Place of Death	L		
Niche Wall Details			
Niche Wall Number/s			
Cemetery			
I hereby certify that I am the Applicant for this interment, I have authority for the use of this niche wall compartment, and I have:  ☐ Checked the urn dimensions, they do not exceed L 19cm, H 8cm, W 11cm. ☐ Forward a copy of the cremation certificate to cemeteris@amrshire.wa.gov.au			
Signature of Applicant			
Signature of Applicant			
Date			

INSTRUCTION FOR PLACEMENT OF ASHES - NICHE WALL