

BLAYNEY SHIRE COUNCIL

CEMETERY RESERVATION FORM

PO Box 62, Blayney NSW 2799 Ph: (02) 6368 2104

Email: council@blayney.nsw.gov.au
Web: www.blayney.nsw.gov.au

Applicant Details

Applicant Details					
Name:					
Address:					
Telephone No:					
Mobile:					
Applicant's Signature:					
Person/s to be Burie	d/Intorrod				
Name:	u/iiiterreu				
ivaille.					
Plot Details					
Row:					
Plot:					
Extra Depth for addition	nal Burial:		Required	d / Not Requ	uired
Ashes Interment:				<u> </u>	
Cemetery					
Blayney	Hobbys Ya	rds	Carcoar		
Millthorpe	Newbridge		Lyndhurst		
Neville					
Section					
Lawn	General	General			
Anglican / Church of England			Independent		
Roman Catholic		Presbyterian			
Niche Wall Public			Methodist / Uniting		
Niche Wall Private		Seventh Day Adventist			
Niche Wall Name: (eg l	ions 1 East Wall)				
Office use					
Received by:	Date:	Receipt	No:	\$	
- Neccived by:	Date.	·	tion fee or	Ψ	
		Paid in t			
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