

APPLICATION FOR PURCHASE OR RENEWAL OF GRANT OF RIGHT OF BURIAL
BUSSELTON AND DUNSBOROUGH CEMETERIES



All correspondence to:
The Chief Executive Officer, Locked Bag 1, Busselton WA 6280
P: (08) 9781 0444 E: city@busselton.wa.gov.au W: www.busselton.wa.gov.au

APPLICANT		
Full Name:		
Address:		
Suburb:	State:	Postcode:
Telephone:	Mobile:	
Email Address:		
Cemetery <input type="checkbox"/> Busselton <input type="checkbox"/> Dunsborough	<input type="checkbox"/> Catholic <input type="checkbox"/> Anglican <input type="checkbox"/> OPD <input type="checkbox"/> Lawn	Section: A B C D Lot No _____
<input type="checkbox"/> New Grant for new grave <input type="checkbox"/> Renewal of current Grant <input type="checkbox"/> New Grant for previously expired Grant <i>Fees apply – Please refer to the City of Busselton’s Cemetery Schedule of Fees and Charges</i>		
Where the application is for a renewal of the current Grant or purchasing a new Grant on an expired grave the applicant must be either: <ul style="list-style-type: none"> the Grantee to whom the previous Grant was issued, or a person having Enduring Power of Attorney (EPA) acting on behalf of the Grantee, or a person named as Executor of the late Grantee’s will, or to whom Probate of Will has been granted and who is a beneficiary of any property held by the late Grantee, including the above-mentioned Grant . (a copy of the will may be required for retention), or where the original Grant has expired, the applicant is acting with authority and declares that there is no other person to their knowledge having a greater claim to apply to purchase the Grant. The attached Statutory Declaration is to be completed and supporting documentation if applicable attached. 		
ORIGINAL GRANTEE DETAILS (if applicable)		
Full Name:		
Address:		
		Postcode:
Signature of Applicant:		Date:
The term of the Grant shall be 25 years, <ul style="list-style-type: none"> from the date of application in the case of a new grave, or from the date of expiry of the original grant in the case of a renewal of a current grant, or from the date of application in the case of purchase of a grant for an expired grave. 		
Receipt No:		

WESTERN AUSTRALIA

OATHS, AFFIDAVITS AND STATUTORY DECLARATIONS ACT 2005

STATUTORY DECLARATION

I, _____
(Full Name)

of _____
(Address)

in the State of Western Australia, do solemnly and sincerely declare that:

I am applying to the City of Busselton to purchase a Grant of Right of Burial for grave/s, for which the previous grant has expired:

(Cemetery, Denomination, Area, Grave Number/s)

The original grantee named below is either deceased, or does not object to the purchase of this grant.

(Full name of Original Grantee)

I am the _____
(State the relationship of the Declarant to the Original Grantee)

I certify that there is no other person with equal or greater interest objecting to the purchase of this grant.

I indemnify the City of Busselton against litigation resulting in the purchase of this grant.

This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.

This declaration is made in the *Oaths, Affidavits and Statutory Declarations Act 2005*

at
(place)

.....
(date)

in the presence of –

.....
(Signature of authorised witness)

.....

.....
(Name of authorised witness and qualifications as such as witness)



By

.....
(Signature of person making the declaration)