## TOWNSVILLE CEMETERIES

**SECTION 1: PLOT DETAILS** 

PLOT:

SECTION/SUBDIVISION:

## Form # 3 TRADITIONAL BURIAL ACKNOWLEDGEMENT



Form to be returned to: Email: townsville.cemeteries@townsville.qld.gov.au

Postal: Townsville City Council, PO Box 1268, Townsville Qld 4810

Phone: 13 48 10

Service Desk location: 103 Walker St, Townsville City

TOWNSVILLE CITY COUNCIL BELIEVES IN FOSTERING UNDERSTANDING AND APPRECIATION OF THE HISTORY, CULTURES AND TRADITIONS OF ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLES. THIS FORM APPLIES WHEN A FAMILY REQUESTS TO BACKFILL A GRAVE IN ACCORDANCE TO THEIR TRADITION.

<b>SECTION 2: APPLICANT DE</b>	TAILS			
APPLICANT 1.				
TITLE:	GIVEN NAME/S:	SURNAME:		
DOCTAL ADDRECC.				
POSTAL ADDRESS:				
SUBURB:		STATE:	POSTCODE:	
MOBILE NUMBER	WORK OR HOME PHONE NUMBER:	EMAIL ADDRESS:		
MODILE NOMBER	WORKOK HOME HOME KOMBEK	EMALE ADDICESS.		
APPLICANT 1 SIGNATURE:	DATE (DD/MM/YYYY):			
APPLICANT 2.				
TITLE:	GIVEN NAME/S:	SURNAME:		
		SURNAME:		
		SURIVANIE:		
POSTAL ADDRESS:		SUKNAME:		
POSTAL ADDRESS:		SURNAME:		
POSTAL ADDRESS: SUBURB:		STATE:	POSTCODE:	
			POSTCODE:	
	WORK OR HOME PHONE NUMBER:		POSTCODE:	
SUBURB:	WORK OR HOME PHONE NUMBER:	STATE:	POSTCODE:	
SUBURB:  MOBILE NUMBER		STATE:	POSTCODE:	
SUBURB:	WORK OR HOME PHONE NUMBER:  DATE (DD/MM/YYYY):	STATE:	POSTCODE:	
SUBURB:  MOBILE NUMBER		STATE:	POSTCODE:	

Please tick acknowledgements below:

I/we acknowledge the Traditional Burial procedure stated above and agree to abide by any directions given by the Funeral Director or Cemetery staff in the course of the burial service.

I/we acknowledge that the Funeral Director must supervise the burial and all matters relating to Workplace Health and Safety.

I/we acknowledge that Townsville City Council and the Cemetery staff cannot be held responsible for the health and safety of any person/s attending the Traditional Burial, in the event that an injury occurs as a result of a failure to comply with the Townsville Cemeteries Statement of Principles.

I/we acknowledge I have read and understood the terms of the Townsville Cemeteries Statement of Principles.

## TERMS

I declare that the information I have provided in this form is complete and correct. I understand that giving false or misleading information is a serious offence under section 234 of the Local Government Act 2009. Townsville Cemeteries Statement of Principles townsville.qld.gov.au/facilities-and-recreation/cemeteries

## PRIVACY NOTICE

Townsville City Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which Council manages personal information is governed by the Information Privacy Act 2009 (QId). We are collecting your personal information in accordance with *Local Government Act 2009* so that we can assess and process your application. Generally, we will not disclose your personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our <u>Information Privacy Policy</u>.