

Email: cemeteries@mdc.govt.nz

## **Application for Monumental or Lawn Conversion Work**

Company Name & Address :					
Full Name of Deceased:					
Cemetery:			Unveiling Date:		
Date of Death - Plot Details:	/ /	Plot No Ro	w No Sub:		
Work to be carried out:	Monumental M	lason work /	Lawn Conversion		
Monumental Permit Fee:	\$75.00 Forw	arded by mail / '	Γo be invoiced		
Monumental Inscription:					
from the standard deta  Map of Plots:	ils will require the	ne written consei	nt of Council before Row:	e being erecte	d.
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Council: Confirmation of de	etails as above			/	/
Debit Invoice Request No.		_			
Debit Note/Receipt No:		Permit No:		Date:	/ /
Invoice No.		Interment ID		Land Informa	ation Officer [
Unveiling Date:	1	Map ID			