

Form of Instruction for Grave and Application for Order of Burial

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Date of Application: _____

Name of Deceased: _____

Age of Deceased: _____

Latest place of residence for deceased: _____

Place where death occurred: _____

Date of Death: _____

Rank or occupation of deceased: _____

Birthplace of deceased: _____

Nature of the disease, or supposed cause of death: _____

What denominational ground? _____

What compartment? _____ What section? _____

Number of grave on plan: _____ Is it a public grave? Yes No

Is it a private grave? Yes No

Is the ground to be selected by applicant or by trustee? _____

Size of ground: _____

Is a grant required, and if so, to whom? _____

If already granted, give number of grant and name of grantee: _____

Length and width of coffin: _____

Depth of grave: _____

Is it the first interment in the grave? Yes No

Date of the last interment in the grave? _____

Date of the burial: _____

At what hour, and if usual or extra: _____

Name of minister or person to officiate at grave: _____

From where the funeral is to start: _____

Name of undertaker: _____

Name in full, and signature of person making application: _____

Occupation: _____

Address: _____

Office Use Only

Date Application received: _____

Number of burial order: _____ Number in register of burials: _____

Number in denominational book: _____ Number of receipt: _____

Number of grant (grave): _____

Note: If a free interment is required, specify the name of the Magistrate signing order and date thereof.

Signature: _____