

# Application for Monumental Works



- All monumental works carried out in CMCT managed cemeteries are subject to prior approval by Cemetery.
- Works cannot commence until the Cemetery provides a written notice of approval; the payment of any fee does not constitute an approval.
- On receipt of this Application, a check is made to ensure construction will be in accordance with the Australian Standard, AS 4020-1994 (Headstones and Cemetery Monuments) and CMCT's Requirements for the Construction of Monuments as a minimum.
- Application is to include drawings showing monument meets such requirements.

## Area Details

Full Name of Deceased (If applicable): \_\_\_\_\_

Cemetery (Please Tick):  Rookwood  Liverpool  North Rocks  Greendale

Area / Section: \_\_\_\_\_ Plot Number: \_\_\_\_\_

## Monumental Mason / Person Conducting Works

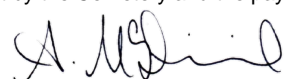
Business Name: **JOHN J. MCDIARMID & SONS**

Address: **610 Bunnerong Road, Matraville NSW 2036**

Phone: **9661 8660** Email: **jjm@ihug.com.au**

Mason Agreement Terms and Conditions:

1. I certify that I have been authorised by the person making this application, to prepare a memorial and that the reverse side of this application contains the location, specifications and a detailed sketch of this memorial.
2. I certify that this memorial is made entirely of first-grade material and guaranteed by me to be free from all flaws and defects and that the workmanship on said memorial will be of the highest standard. Should a defect in material or workmanship become apparent before the lapse of five years from date of setting, the cemetery management shall make such declaration in writing to the monument dealer and the memorial will be replaced without cost to the cemetery.
3. I hereby agree to abide by the rules and regulations of this Cemetery now in force or hereafter adopted, in the erection of the memorial work in the abovementioned Cemetery, and further agree that if in the opinion of the Cemetery Management should the completed memorial not comply with said rules and regulations, it will at the request of the Cemetery, be removed by me within three days of such request, without cost to the Cemetery or the grave owner.
4. I hereby agree to pay for any damage to graves, walks, trees, shrubs, memorials, etc., during the transportation and setting of this memorial. I hereby agree to indemnify, defend and save harmless the Cemetery upon, or from, any and all claims, demands or alleged causes or action arising by reason of the erection of said memorial.
5. No memorial, once erected, may be removed from the Cemetery without written permission of the Cemetery Management.
6. No tools, equipment, structure, etc., required in the erection of the memorial may be left overnight in the Cemetery without the written permission of the Cemetery Management.
7. Acceptance of this permit by the Cemetery and the payment for monumental fees or other payments do not constitute complete approval of this application.

Signature of Mason:   Date:.....

## Applicant Details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I warrant that I: *(Please select one of the following)*

Am the person in whose name the Right of Interment has been granted

Have the written authority of the person in whose name the Right of Interment was granted\*

Am the legal representative of the person in whose name the Right of Interment was granted\*

*\*Copies of written authority and/or confirmation of legal representation must accompany this application*

Applicant Agreement Terms and Conditions:

1. I warrant that all the information given is correct and consent to the work described in this application being carried out. As holder of the Right of Interment, I acknowledge that I have a responsibility to maintain the monument in thorough order and condition and if I do not the Cemetery has the right to remove it and recover the cost of doing so from me.
2. I do agree to indemnify and hold harmless the Cemetery against any claims, actions, liability, loss or damage or expense arising to or against the Cemetery in respect to the monument, the condition or repairs of or damage to the monument, or the removal of the monument occurring at any time after the installation of the monument.
3. I also acknowledge that it is my responsibility to advise the cemetery of any change of my address.

Signature of Applicant:  \_\_\_\_\_ Date:.....

## WORK SPECIFICATION

<b>Material Type:</b>	Headstone	Base	Kerb
<b>Dimensions:</b>	x    x    mm	x    x    mm	x    x    mm

**Inscription:**

**Detail Work Requested**

(please tick)

	Single	Double	Multi		Fees Payable
Headstone including 1 <sup>st</sup> Inscription				\$	.00
Kerbing					.00
Tiles, Marble chips, Composition, etc.					.00
Slab					.00
Renovation*					.00
Additional Inscription					.00
Crypt Inscription					.00
Vault Inscription					.00
Vault Construction					.00
Other (describe)					.00
				<b>Total</b>	.....

How will lettering read? All lettering and inscription  
 Work must duplicate existing work in both form and method. If  
 Inscription is not in English, a full written translation must be  
 Provided. If insufficient space please attach a copy of full  
 Inscription.

\* Renovation is clean or repair only - Replacement is new work

SCALE SKETCH OF MEMORIAL TO BE PLACED SHOWING ALL DIMENSIONS. (If space is inadequate, attach a sheet containing scale drawing.)

For Vault construction, full architectural plans and specifications must accompany this form.

**WHS Requirement:** All Contractors to sign attendance book within Office prior to commencement of work including details of place of work, grave number, number and names of each employee attending.

**OFFICE USE ONLY:**

Date Received: ..... Receipt No: ..... Amount: ..... By .....

Application Approved: .....

Initial Inspection ..... Foundation Inspection: ..... Final Inspection:.....

Catholic Cemeteries & Crematoria  
 Liverpool Cemetery & Crematorium

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