# Certificate of perpetual interment right

Purpose of this certificate:

A cemetery operator must provide a certificate to the holder of a perpetual interment right.

Certificate approved by Cemeteries & Crematoria NSW under subsection 65(4) of the *Cemeteries and Crematoria Act 2013.*

This certificate allows for the exclusive right to have specified remains interred at a specific site and to be left undisturbed forever. This does not represent a certificate of title to land within [cemetery name].

The interment right may be transferred subject to the terms of the *Cemeteries & Crematoria Act 2013.*

A cemetery operator can revoke a perpetual interment right if the right is not exercised within 50 years after it is granted.

Holder of perpetual interment right

**Holder 1**

Given name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Suburb: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode \_\_\_\_\_\_\_\_\_

**Holder 2**

Given name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Suburb: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode \_\_\_\_\_\_\_\_\_

Interment site

Area/Wall: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Row: \_\_\_\_\_\_\_\_\_\_\_\_ Plot no:\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of persons whose remains may be interred: \_\_\_\_\_\_\_\_\_\_\_

Identity of person/s whose remains may be interred:

**OR**

Class of person/s whose remains may be interred: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Specify a person who may nominate the person/s whose remains may be interred**:**

 Signed for and on behalf of

 Cemetery operator/cemetery

 Name

 Position

 Date