

APPLICATION FOR NATURAL BURIAL (FPS024)



89 Earl Street
PO Box 1145
Narrogin WA 6312

(08) 9890 0900

www.narrogin.wa.gov.au
enquiries@narrogin.wa.gov.au

CASHIER HOURS:
8:30am – 4:30pm
MONDAY- FRIDAY

Application No: _____

Date Received: _____

FUNERAL HOME

DECEASED DETAILS

Surname					
Other Names					
Address					
Date of Birth		Age		Sex	
Birthplace			Occupation		
Date of Death		Date of Burial		Time	
Minister Officiating					

APPLICANT DETAILS

Surname			
Other Names			
Address			
Telephone No		Email Address	

DECLARATION

I hereby certify that I am the Applicant for this interment and agree to be bound by the terms and conditions of the attached Natural Burial Agreement.

Signed by the Applicant

Signature.....Date

OFFICE USE ONLY

Application Received		Agreement Received		Initials	
Application Approved by				Date	
Signed					

Invoice		Receipt		Date	
Register of Burials		Agreement No		Synergy / Chronicle	