

Application to Perform Monumental Work

This form should be completed by the person or business proposing to carry out monumental works, in conjunction with the Burial Right Holder or next of kin of the deceased. A public liability insurance Certificate of Currency is required to accompany this application.

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Organisation Name (if applicable)										
Title		Surname				Given I	Names			
Postal A	ddress									
Suburb						State			Postcode	
Phone N	umber				Email A	ddress				

Public Liability Insurance

Certificate of Currency Supplied (\$20 million coverage)	Yes		No		
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Interment Site Details

Name of	the Deceas	ed						
Male		Female		Date of Death				
	Gatton Cemetery			Laidley Ashes I	Memorial Garde	en		
	Laidley Co	emetery			Commonwealth War Grave			
	Caffey Cemetery		Cemetery Section					
	Murphys Creek Cemetery		Grave Number					
	Forest Hill Cemetery (Columbarium Number/Side			Niche Number		



Proposed Monumental Works

Proposed dates i	or work to be	undertaken							
Note, out of cour commence. This Cemetery activit	is to ensure th	at monumental							
Specify machine	ry to be used o	n site							
Description/diag	ram of propos	ed works <i>(for de</i>	etailed works,	please	submit d	drawings on a	an additiona	page)	
				1					
				_					
Clean Up – Up	on completi	on of works							
Clean Up – Up I will remove all			umental work	ks after	complet	tion of the w	orks.	Yes	
			umental work	ks after	complet	tion of the w	orks.	Yes	
	waste resultin	g from the mon		ks after	complet	tion of the w	orks.	Yes	
I will remove all surial Right Ho	waste resultin	g from the mon	al	s after	·	tion of the w	orks.	Yes	
I will remove all surial Right Ho	waste resultin	g from the mon	al		·	tion of the w	orks.	Yes	
I will remove all Burial Right Ho Title Postal Address	waste resultin	g from the mon	al G		·	tion of the w	orks. Postcode	Yes	
I will remove all Gurial Right Ho Title Postal Address Suburb	waste resultin	g from the mon	al G	iiven Na	·	tion of the w	T	Yes	
I will remove all Gurial Right Ho Title Postal Address Suburb Phone Number	waste resultin	g from the mon	al G	iiven Na	·	tion of the w	T	Yes	
I will remove all	Ider/Next o Surname Deceased	f Kin Approva	Si Email Add	iven Na tate ress	ımes		Postcode		as



Applicant Declaration

I hereby certify that the monument will be constructed/modified/repaired in accordance with all relevant Australian Standards and Codes or Acts and Lockyer Valley Regional Council laws.

 Local Law No.1 (Administration), Subordinate Local Law No. 4 (Local Government Controlled Areas, Facilities and Roads), Subordinate Local Law No. 1.13 (Undertaking regulated activities regarding Human Remains)

I understand that assessment of this application cannot proceed until it is complete and correct in all details and the relevant fee paid.

I will ensure the following:

- Compliance with Workplace, Health and Safety legislation.
- A risk assessment is completed, and management plan developed and implemented.
- Safe Work Method Statements for High-Risk Tasks are developed and implemented, ensuring a safe site during works for workers and community members.

I agree to undertake the following actions:

- Display of Permit during installation.
- Comply with Local Laws and all conditions as specified in any permit issued.
- Notify Council of completion and supply photo/s via email to <u>mailbox@lvrc.qld.gov.au</u>.

I declare that the information supplied in this application is complete, true and correct. Council reserves the right to approve or deny applications to ensure the proposed works are in line with the Monumental requirements of the locations specified in this application. I understand that works must not commence until written approval has been received from Lockyer Valley Regional Council.

I have supplied Council with a Certificate of Currency with \$20 million public liability coverage. I agree to comply with all Council requirements and undertake to make good any damage resulting from activities by myself or others on my behalf.

I agree and accept that Lockyer Valley Regional Council will not be held responsible or liable for any dispute arising from any monumental works carried out under this application. I hereby indemnify and hold harmless Lockyer Valley Regional Council, its servants and agents from any claims, actions, suits or demands arising from monumental works carried out under this application.

Signature	Date	
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Privacy Statement

These details will only be used for the purpose for which they have been collected and will not be used for any other purpose. We will not disclose the information you provide outside of Council unless we are required by law or you have given your consent. To the fullest extent allowed by Council, its officers and employees will not be liable for any claims in respect of any loss arising out of, or in connection with, the use of any of the supplied information.