

Business & Community Services

Southern Downs Regional Council

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Website: www.sdrc.qld.gov.au

Application for Memorial Plaque If you have any specific enquiries regarding fees or how to complete this form, please contact Council. Please complete this application in BLOCK LETTERS and tick boxes where applicable. Complete all sections unless otherwise stated. Full Name(s) of Applicant: **Applicant Details** Contact Name: Street Address: City: State: Postcode: Postal Address: City: Postcode: Phone: Mobile Phone: A/H Phone: **Email Address:** ACN/ABN: Relationship to deceased: Guidelines for a A standard plaque includes 7 lines of wording and 1 flat motifs. Any additional lines, motifs, sculptures, photos and border styles may incur additional costs. **Plaque** Integrated Bronze Image Plaque is also available, please contact Council's Customer Service Office to discuss further. A plaque proof will be sent out for review and production will not commence until we have received an

- A plaque proof will be sent out for review and production will not commence until we have received an Approved signed proof from only the Applicant.
- The plaque order and installation takes approximately 6-8 weeks and the Applicant will be notified when the plaque installation is completed.

Australian Service Emblems

• Permission must be obtained to use the service emblems i.e. AIF, RAN and RAAF. Please provide the relevant service details to enable us to obtain this permission.

Payment

 Any costs/additional costs associated with purchasing a plaque are required to be paid in full prior to the plaque being ordered.

Please Note

- Council will not be held liable for any additions to inscriptions after same has been inscribed on the plaque, except for additional lettering in the event of future interment.
- Placing any other memorial, nameplate, token or tribute on any grave is in breach of Council's Local By-Law and is PROHIBITED in the Lawn Cemetery.

Examples

Below are some examples of emblems, motifs and plaques. To obtain a full range of options that are available, please visit www.worssell.com.au or contact Council's Customer Service Officers 1300 697 372 to discuss further.

Emblems/Motifs

































Emblem/Motif Required

Plaque samples

JEREMY MARK WATLEFON

F

6.6.2005

SON OF JAMES & LAURA
FOREVER LOVED AND REMEMBERED
OUR LITTLE ANGEL IN HEAVEN

BRG/B/250

IN LOVING MEMORY OF



KRISTOBEL TANYA WATLEFON

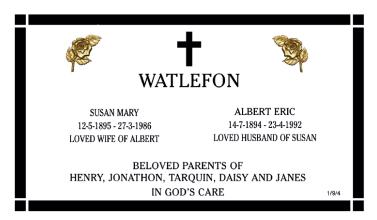
 $12.4.1948 \; \hbox{-}\; 8.9.1998$

BELOVED WIFE OF HOMER

DEVOTED MOTHER OF JERRY, ALEX, CARMEL JOYCE AND SANDRA

SADLY MISSED BY FAMILY AND FRIENDS REST IN PEACE ${\sf C}$

CA/L/Z/2





DORIS WATLEFON

NEE CARINS

BORN 12-12-1912 DIED 17-04-1997 BELOVED WIFE OF JOHN

MUCH LOVED MOTHER OF SUSAN, GRAHAM & ROBERT

REST IN PEACE

MG/X/1

Plaque Text	Complete below or attach a separate sheet (For sample plaque and additional information, see reverse side of form or visit www.worssell.com.au)	
Name for Plaque:	(Use BLOCK Letters)	
1 st Line		
2 nd Line		
3 rd Line		
4 th Line		
5 th Line		
6 th Line		
7 th Line		
Additional details		
Privacy Notice	The information on this form is collected for purposes related to deciding this application and monitoring compliance under the Information Privacy Act 2009 ('the Act'). This information may be stored in Council's records database and may also be used for statistical research, information provision and evaluation of services. Your personal information may be provided to the financial institution which handles Council's financial transactions and may be disclosed to other Local Government agencies, State government and third parties for purposes related to this application and/or monitoring compliance with the Act. Except in these circumstances, personal information will only be disclosed to third parties with your consent unless otherwise required or authorised by law.	
Signature of Applicant	I,, certify that the above information and the information on the attachments, to the best of my knowledge, is correct.	
	Signature:	Date:
Complete if more than one Applicant.	I,, certify that the above information and the information on the attachments, to the best of my knowledge, is correct.	
	Signature:	Date:
Office Use Only	Received by:	Receipt number:
	Fees paid:	Notes: