

# **Application for Scattering Ashes**

#### Town

Derby
Fitzroy Crossing

Scattering of Ashes Location		
Approval Received from land owner to scatter Ashes?	Yes	No
Additional Information		

## **Details of Applicant**

Surname:		Given Name:		
Residential Address:	Suburb:		Postcode:	
Postal Address:	Suburb:		Postcode:	
Email:	Phone:		Mobile:	

#### Declaration

#### Important: Please read and sign this declaration for your application to be processed

I understand that I can only scatter the Ashes with land owner's approval

Signature of Applicant: Date:
-------------------------------

## SHIRE ADMINISTRATION USE ONLY

Shire Officer Name:	Officer Signature:	
Authorised Approving Officer:		
Signature:	Date:	

Derby

(08) 9191 0999

30 Loch Street Sdwk@sdwk.wa.gov.au PO Box 94, Derby WA 6728

# **Fitzroy Crossing**

 (08) 9191 5355 Sdwk@sdwk.wa.gov.au Flynn Drive PO Box 101, Fitzroy Crossing

ABN: 99 934 203 062

www.sdwk.wa.gov.au