

## **SHIRE OF WILLIAMS**

Brooking Street, Williams Western Australia Office Hours: Monday to Friday 8.30am to 5.00pm All communications to be addressed to: Chief Executive Officer PO Box 96 WILLIAMS WA 6391 **Telephone: (08) 9885 1005** Facsimile: (08) 9885 1020

shire@williams.wa.gov.au

## Application for Monumental Work, Permit #

man	Name of Deceased:																			
Area	Area & Grave Number:																			
Nan	ne of A	pplic	ant:																	
Add	ress o	f App	licant	:																
Tele	phone	Num	ber:																	
abov issue	eby ce emented will ws and	ioned be su	grave bject 1	to ap	prove dition	erecti s stipu	on of	the mo	emoria	al deta	iled h	erein a	and I a	ccept	that tl					
Signature Date:															r					
inioi	matio	n cont	ainea	in this	s torm															
Details of Mason: (this section to be completed by the Monumental Mason)																				
Nam	Name of firm												Quoted cost					Date		
Addr	Address												Signature of mason							
Pla:	Do you wish to:  □ Add further inscription □ Renovate or add further monumental work □ Install a new memorial  Plans and Specifications: (NOTE that all plans and specifications of memorials submitted must be carefully drawn, fully dimensioned and all materials specified. All descriptions to be in block letters. All ornaments etc. to be shown and dimensioned. Size of dowels and dowel holes to be specified.																			