

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

SHIRE ADMINISTRATION USE ONLY

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

Derby

3 (08) 9191 0999

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