

Memorial Request Application

OFFICE USE ONLY

Reference No.

About this form

Use this form if you would like to submit an **expression of interest** for a memorial on Council owned or managed land. A memorial will provide an opportunity to create a public tribute to an individual, group or an event that has had a significant impact on the local Bayside Community.

Your request will be considered in accordance with <u>Bayside Memorial Policy</u>. Read about placement of memorials before you start your application. Final approval for the specific location of the memorial remains the responsibility of Council. Moreover, Council reserves the right to move the seat to another location should this become necessary for operational or other reasons

Applicant details										
Title:	☐ Mr	□ Mrs	☐ Ms	☐ Oth	ier l	☐ Prefer not to	o say			
First Name:				Family Name:						
Company or Association(if applicable):										
Addre	ess:									
Subu	rb:			State:		Post Code:				
Emai	Address:									
Daytime Telephone No. (Home/Work):				Mobile No:						
Why would you like a memorial?										
Com	For an individual that was strongly linked to the Bayside Council community For an individual that has made a substantial contribution to the leadership, cultural and social aspects of the Bayside council area development or shared community history. For a group or association who have made a substantial and outstanding contribution to the Bayside community. A significant historical or cultural event which has a profound resonance with the broader Bayside community or is of national or state significance mmemoration details:									
First	Name:			Family Name:						
Company or Association(if applicable):										
Describe the individual/association you wish to commemorate:										
Details of the connection between the person being memorialised and the Bayside community:										

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Provide details and documer	ntation supporting the connection/	contribution to community.						
Type of Memorial Prop	osal							
Select which type of Memoria	al you are considering (select only	one)						
☐ Tree Details								
Requested Location–(Counc	il will decide on location of memori	al after consultation):						
☐ Bench/Garden seat with	/without a plaque (select one)							
☐ Memorial Bench/ Garden	seat	· with plaque						
Requested Location(Council will decide on location of memorial after consultation):								
The bench or garden seat memorials applications are placed on a waitlist and put on the City Projects Program. Bayside Counci adopts the latest programs at the beginning of a year for implementation in the following fiscal year.								
Plaque Details (if required)								
Follow the rules and guideling	es for plaques set out on page 3 o	f this form.						
Fees & Charges								
	e assessment of the application. In							
Fees			Office Use					
Memorial Application Fee		\$150.00	MM					
Supporting Documentation	ı							
1. Supporting document	ation to assist in assessment	□ Yes	☐ Yes					
Declaration								
I declare that the information	on given is true and correct.							
 I understand that if incomplete, the application may be returned to me, delayed, rejected or more information may be requested within 21 days of lodgement. 								
 I hereby vouch for the good character and enduring moral qualities of the individual or group to be memorialised. 								
• The personal information required on this form may be available for public access under various legislation.								
Applicant's Signature		Date	/ /					
CM reference: 24/25794 Last updated:	30/04//2024		2/3					

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How to lodge this application

You can lodge your completed application form and any required supporting documents:

E-mail

Send you application to CS.applications@bayside.nsw.gov.au. All applications lodged via email, must be paid by credit card over the phone. *If lodged via email, Council's Customer Service Officers will contact you to organise an over the phone payment.

In person

At any of Council's Customer Service Centres:

- Rockdale Customer Service Centre: 444-446 Princes Highway, Rockdale NSW 2216
- Eastgardens Customer Service Centre: Westfield Eastgardens, 152 Bunnerong Road, Eastgardens NSW 2036

By mail

Post to Bayside Council: PO Box 21, Rockdale NSW 2216 with payment via cheque or money order (do not send cash)

Privacy notification

Completion of this document is voluntary – partially completed applications may result in refusal of the application. The personal information provided on this form (including your name and other details) will be handled in accordance with the Privacy and Personal Information Protection Act 1998 and may be available to the public under various legislation.

OFFICE USE ONLY					
Receipt No	Date	\$			

Memorial Plaque Rules and Guidelines

Applicants have the option of installing a plaque located on the back of the bench at additional cost. Council will only approve plaques if the proposed wording meets the following guidelines:

Wording is simple and concise.

Due to the limited space on the plaque not all requests may be accommodated.

Approved by Bayside Council's General Manager.

Suggested format for plaques may be:

- Dedicated to [NAME]
- By/from, or a short message (max ten words)
- Year of donation

An example might be "Dedicated to David John Smith by his Family, 2015"

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