



**EKURHULENI METROPOLITAN MUNICIPALITY**  
**DEPARTMENT REAL ESTATE**  
**CEMETERY DIVISION**

## PERMIT TO PLACE A MEMORIAL/ PLAQUE

(TO BE COMPLETED IN DUPLICATE WITH PLAN AND MEASUREMENTS OF PROPOSED MEMORIAL WORKS)

<b>CEMETERY</b>		<b>CONTACT NR</b>																		
<b>ADDRESS</b>		<b>TO</b>																		

ADDRESS																					
<b>STREET</b>	101 JONES AVENUE																				
<b>SUBURB</b>	BRAKPAN												<b>POSTAL CODE</b>				1	5	4	0	
<b>CONTACT TEL NR</b>	0	1	1	7	4	0	0	5	6	0	<b>CELL NR</b>	0	7	1	7	4	4	6	3	7	5

PARTICULARS OF NEXT OF KIN																					
<b>INITIALS</b>											<b>TITLE</b>										
<b>SURNAME</b>											<b>RELATIONSHIP</b>										
<b>ADDRESS</b>	101 JONES STREET																				
<b>TEL NR (H)</b>						<b>TEL NR (W)</b>						<b>CELL NR</b>									
<b>SIGNATURE OF APPLICANT</b>											<b>DATE:</b>										
<b>NAME OF STONE MASON</b>	BENWEST MEMORIALS										<b>CONTACT NR</b>	0	7	9	5	2	1	1	5	4	4
<b>ADDRESS</b>	10 JONES AVENUE, BRAKPAN																				

SIR/ MADAM

PERMISSION IS HEREBY GRANTED TO PLACE A MEMORIAL / PLAQUE ON THE GRAVE / NICHE OF

THE **LATE**

AT **THE** CEMETERY

<b>GRAVE NR</b>		<b>SECTION</b>		<b>NICHE NR</b>	
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THE PLACEMENT OF MEMORIAL WORK IS SUBJECT TO THE FOLLOWING CONDITIONS:

1. THAT THE PLACEMENT COMPLY WITH THE CEMETERY BY-LAWS.
2. THAT THE PLACEMENT IS DONE TO THE SATISFACTION OF THE CEMETERY SUPERINTENDENT.
3. THAT THIS PERMIT MUST BE SUBMITTED TO THE CEMETERY SUPERINTENDENT BEFORE ANY WORK MAY COMMENCE.

YOURS FAITHFULLY

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CEMETERY SUPERINTENDENT