



WAIROA DISTRICT COUNCIL

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cemeteries@wairoadc.govt.nz

www.wairoadc.govt.nz
PO Box 54, Wairoa 4160, Hawke's Bay
Coronation Square, Queen Street, Wairoa

APPLICATION FOR A PAYMENT PLAN

Please fill out this form if you wish to apply for a payment plan for cemetery costs, complying with Part 6 - Cemeteries of the Consolidated Bylaw 2023.

The **application fees** for cemetery costs can be found on the Fees & Charges page of Council's website. Head to www.wairoadc.govt.nz and search for 'fees & charges'. If you require assistance filling out this form, please get in touch with us.

For more information, please contact Council on (06) 838 7309.

Please answer all questions fully.

Applicant Details

Full Name	_____
Postal Address	_____
	_____ Post Code _____
Email Address	_____
Phone Number	_____

Payment Plan Details

Please fill out the details below.

Plot cost for Exclusive Right of Burial		
Other		
Less Deposit Paid		
Subtotal		
Total		

Note: All costs are inclusive of GST

Regular Instalments \$ _____ per week/month over a 6-month period.

Application & Declaration

The Council relies on the information contained in this application being complete and accurate. The Applicant must take all reasonable steps to ensure that it is complete and accurate and accepts responsibility for information in this application being so.

I hereby apply for a payment plan for cemetery costs, complying with Part 6 - Cemeteries of the Consolidated Bylaw 2023 and I certify that to the best of my knowledge and belief the information given in this application is complete and accurate. I agree to pay the Wairoa District Council the total amount as prescribed on page 1 of this form, in regular instalments as prescribed on page 1 of this form over a maximum period of 6 months. I understand that failure to do so may result in further action.

Signed by the Applicant _____

Full name of person lodging this form _____

Date _____

WDC Office Use Only

Customer Number _____

Payment Details

Date _____

Receipt Number _____

Approval

This is approval for this payment plan, given by an authorised officer of the Wairoa District Council:

Signed by Officer _____

Full Name Officer _____

Date _____