# Request for a

# **Public Memorial**



Q Civic Centre, 68 Elizabeth Street, Moss Vale NSW 2577 (PO Box 141, Moss Vale NSW 2577)

**८** (02) 4868 0888 **■** mail@wsc.nsw.gov.au

### **How to Complete this Form**

- Read the Public Memorials Policy and Public Memorials Policy Guidelines for eligibility criteria for Public Memorials. A copy of these documents can be obtained from <a href="https://www.wsc.nsw.gov.au/Council/Policies">https://www.wsc.nsw.gov.au/Council/Policies</a> or by Contacting Council for a hard copy on 02 4868 0888.
- 2. Complete all information required in Part A of this form.
- 3. All information must be included before request will be assessed and approvals given (including copies of plaque text, letters of support, supporting documentation, plans/specifications etc).
- 4. Email completed form and supporting documentation to: asset.officers@wsc.nsw.gov.au
- 5. Any queries relating to this process, please contact Parks & Buildings Asset Branch on 02 4868 0888.

### **Part A - Memorial Type (to be completed by applicant)**

Please refer to the Public Memorials Policy Guidelines for further information.

Type of memorial	:						
Memorial T	ree	Memorial Park Seat with Plaque	Large Monument/Memorial				
Naming of F	Public Place	Other (please specify):					
Preferred location	n of memorial (su	itability to be assessed by Council):					
Alternate location	n of memorial (su	itability to be assessed by Council):					
Applicant/ Orga	nisation Deta	ilS (to be completed by applicant)					
Organisation Nam (where relevant):	е						
Contact Person:		Relationship	Relationship to Deceased:				
Contact Address:		_	_				
Mobile Phone:		Additional Ph	Additional Phone:				
Email:							
Details of Decea	ased (to be comp	eleted by applicant)					
Name:							
· ·		Period of Res	Period of Residency in Wingecarribee Shire:				

Working with you

# **Details of Contribution to Local Area** (to be completed by applicant) **Not applicable to Memorial Tree Requests Details of Service Contribution to Wingecarribee Shire:** (For further information on what level of contribution is required, please refer to the Public Memorials Policy Guidelines). Period of contribution to the local area: To: From: Contribution to the local area was in a not-for-profit/volunteer capacity? Yes No Evidence of community support attached? Yes No Applications for Large Monuments/Memorials please attach additional relevant information including scope of works, site plan, engineering drawings, ongoing required maintenance, plaque Yes No text etc. Additional Information for Large Monuments/Memorials attached? Plaque Text – Applications for Memorial Seat Only Line 1: Line 2: Line 3:

#### **Privacy Statement**

Line 4:

Line 5:

In lodging this form, you are providing personal information such as your name and contact details. The personal information that Council has collected or is collecting from you is personal information for the purposes of the *Privacy and Personal Information Protection Act 1998* (PPIPA). Your personal information will be handled in accordance with the PPIPA and Council's <u>Privacy Management Plan</u>. For further information regarding Council's privacy obligations, see <u>Privacy Guidelines</u>.

**Purpose of collection:** Your personal information is being collected for the purpose of contacting you or serving correspondence upon you as the applicant of an application.

Intended recipients: Council officers, contractors or agents of Council and persons granted lawful access under the Government Information (Public Access) Act 2009.

**Supply**: Supply of your personal information is voluntary, however, if you cannot or refuse to provide some or all of the information sought, Council may be unable to process your application.

Access/Correction: You may make application for access or amendment to your personal information held by Council. Council will consider any such application in accordance with the PPIPA.

**Storage**: Your personal information is being, or has been, collected and will be held by: Wingecarribee Shire Council, Civic Centre 68 Elizabeth Street, Moss Vale NSW 2577. This form will be placed on a relevant file and recorded in Council's electronic document and records management system.

## **Signature**

#### I DECLARE THAT:

- The information provided in this form is complete and correct.
- I have read and understood the Public Memorials Policy Guidelines with includes eligibility criteria and details relating to maintenance, loss or damage and replacement of public memorials.
- I understand that there is no cost associated with the application however, if the application is approved, I am responsible for all costs associated with the purchase and installation of the memorial.
- I have read the Privacy Statement.
- I understand that Council must deal with personal information in accordance with the *Privacy and Personal Information Protection Act 1998* (PPIPA) and its Privacy Management Plan and that the provisions of the PPIPA and/or Council's Privacy Management Plan may require Council to decline to provide you with access to another individual's personal information.

Name:	Date:	
Signature:		

# Approval Checklist – Completed by Council Officer

								Yes	No	N/A
Proposed subject is deceased, in case of Public Place naming deceased for more than 12 months or, in case of event, more than 50 years prior?										
Minimum criteria for local	l contribution satisfied	?								
Application made by an a	ppropriate person (or le	etter of supp	ort receiv	ed from	appropria	ate person)?	?			
Proposed site appropriate	(consultation with Infi	astructure -	- Open Spa	ace)?						
Consistent with intended	purpose of site, POMs,	Strategic Pla	ans							
Any evident safety risks?										
Is an Application to Carry	out Works on Council L	and (ATCOV	V) require	d?						
Internal Consultation? - If 'yes' see attached consultation details										
		Yes	No	N/A				Yes	No	N/A
Assets – Roads & Drainage	e				Sport and Recreation Committee					
Operations – Parks & Open Space					Arts an	d Culture A	dvisory Committee			
Heritage Planner	Heritage Planner				Council	llors				
Executive Team					Community Groups		s			
Property					Geographical Names Board					
Development Planner					Other					
Council Officer Assessing	Application:									
Comments from										
Assessing Officer:										
DDOLECT ADDDOL/A	•									
PROJECT APPROVA Approval Required By:	Council Officer	T I	General		T		Council			
Approval Required by.	Council Officer		Manager			Council				
Application Approved	Application Refus	sed	Application Reco		ommended Application Not Re			ommend	led	
Reason:										
Council Resolution Minute	e No (where applicable	):								
Approving Officer:					Positio	n:				
Signature:			Date:							
Approval/Defined Letter										
Approval/Refusal Letter	I				1					
Date Sent:				Date Returned:						
Quote for Plaque:					Quote f	for Installat	ion:			
Any other costs:										
Invoice requested date:				Invoice paid date:						
			Yes			No N/A Date				
Plaque ordered				Yes	No	N/A	D	ate		
-				Yes	No	N/A	D	ate		
Memorial seat ordered Tree species determined				Yes	No	N/A	D.	ate		
Memorial seat ordered Tree species determined Signage ordered				Yes	No	N/A	D:	ate		
Memorial seat ordered Tree species determined Signage ordered Works requested through				Yes	No	N/A	D:	ate		
Memorial seat ordered Tree species determined Signage ordered Works requested through Applicant notified of com	pleted works	c place nami	ng onlv)	Yes	No	N/A	D.	ate		
Memorial seat ordered Tree species determined Signage ordered Works requested through	pleted works cal Names Board (public	c place nami	ng only)	Yes	No	N/A	D.	ate		
Memorial seat ordered Tree species determined Signage ordered Works requested through Applicant notified of composition of Geographic	pleted works cal Names Board (public into Conquest	: place nami	ng only)	Yes	No	N/A	Di	ate		