



Cemetery: Spains Road, Salisbury Downs, SA, 5108
 Office: Salisbury Community Hub
 34 Church Street, Salisbury, SA, 5108
 Postal: PO Box 8, Salisbury, SA, 5108
 Telephone: 08 8406 8317
 TTY: 08 8406 8596 (for hearing impaired)
 Email: cemetery@salisbury.sa.gov.au
 Website: www.salisbury.sa.gov.au
 ABN: 82 615 416 895

STILLBORN BURIAL ORDER FORM 2024-25

| | | | |
|---|----------|---|---|
| Site Number | / ST | New stillborn section <input type="checkbox"/> | Old stillborn section <input type="checkbox"/> |
| Date of Funeral | | Time of Arrival at SMP | |
| Authorised Representative | | | |
| Name _____ | | Relationship to Deceased _____ | |
| Address _____ | | | |
| Phone _____ | | Email _____ | |
| Deceased | | | |
| Name _____ | | | |
| Age | ST | Gender _____ | Date of Death _____ |
| Funeral Director | | | |
| Name _____ | | Contact Person _____ | |
| Address _____ | | | |
| Phone _____ | | Email _____ | |
| Signature _____ | | Date _____ | |
| Additional Documents | | | |
| Burial and Memorial Sites Interment Rights and Responsibilities | | | |
| Burial Details & Fees | | | |
| Lease & Plaque | | | |
| New stillborn section – Perpetual lease & granite plaque | \$490 | <input type="checkbox"/> | \$ _____ |
| Old stillborn section - Perpetual lease & bronze plaque | \$370 | <input type="checkbox"/> | \$ _____ |
| Digging Fee | | | |
| New and Old stillborn sections | \$240 | <input type="checkbox"/> | \$ _____ |
| If ashes only (either new or old stillborn section) | \$125 | <input type="checkbox"/> | \$ _____ |
| Total | | | \$ _____ |
| Coffin | | | |
| Height | _____ mm | Width | _____ mm |
| | | Length | _____ mm |
| Special Fees | | | |
| Bookings after 3:30pm | \$550 | <input type="checkbox"/> | |
| Saturday Fee | \$650 | (if after 3:30pm additional \$550) | <input type="checkbox"/> |
| | | | \$ _____ |
| Additional Information | | | |
| Use of SMP's sticks and straps <input type="checkbox"/> | | Graveside service <input type="checkbox"/> | |
| Extra activities (music, food serving) _____ | | | |
| Return Burial Order Form To cemetery@salisbury.sa.gov.au | | | |
| Confirmation at Cemetery | | | |
| Signed by Funeral Director: _____ | | Date: _____ | |