



**MEDICAL REFEREE’S PERMIT FOR CREMATION
OF BODY OF STILL-BORN CHILD**

PUBLIC HEALTH (DISPOSAL OF BODIES) REGULATION, 2002 Clause 41 (1)

I, (full name in block letters)
am a registered medical practitioner in Australia New South Wales or another State or territory and have been appointed in New South Wales as a Medical Referee within the meaning of Clause 42 (c) of the Public Health (Disposal of Bodies) Regulation 2002.

I have received an application for permission for cremation made under Clause 36 (1) of the Public Health (Disposal of Bodies) Regulation 2002 in respect of

.....(Name of child’s mother)

.....(Address)

I have viewed the still-born child the subject of this application. I am satisfied that the child has been certified as still-born by an attending medical practitioner. I am satisfied that the child is a still-born child. I am satisfied that the requirements which must be satisfied before a cremation permit may be issued have all been complied with.

I certify that, to the best of my knowledge and belief, the statements above are true and accurate. I hereby authorise the cremation of the remains of the still-born child to which this permit relates.

Signature..... Full name in block letters:.....

Date:

Address:.....

.....

Phone Number:.....

Registered in:.....(State or Territory) Registration No:.....