

## REGISTER OF CREMATIONS

PUBLIC HEALTH REGULATION, 2012 Clause 86(1)

Cremations carried out at.

.....  
*(Name and location of crematory)*

No.	Date of Cremation	Name, residence and occupation of deceased	Age	Sex	Marital Status	Date of death	District where death registered	Name and address of person who applied for cremation	How ashes were disposed of