

Application to Exhume Remains

Public Health Regulation, 2022 Section 95



In accordance with the requirements of *Section 95(2) of the Public Health Regulation 2022*,

I, _____
(Full name of applicant)

of _____ hereby
(Address)

apply for permission to exhume the remains of the late _____
(Name of deceased)

from Grave No: _____, Section _____, being a single
interment within the _____ Cemetery,
for the purpose of _____

I seek permission to exhume for the following reason/s:

The deceased:

was not known to be infected with a prescribed infectious disease as defined in *Section 79 of the Public Health Regulation 2022*; **OR**

was known to be infected with a prescribed infectious disease as defined in *Section 79 of the Public Health Regulation 2022*

I am entitled to make this application because I am: (tick one)

The executor of the estate of the deceased; **OR**

The nearest surviving relative of the deceased; **OR**

If there is no executor or relative available to make the application, a proper person can make the application for the reasons set out below:

(Full reasons for proper person to make application)

Attached are:

A certified copy of the death certificate of the deceased issued under the Births Deaths and Marriages Registration Act 1995.

A statutory declaration as to:

My relationship to the deceased; and

the wishes of the deceased regarding the disposal of the body (if known);

the reasons why the Secretary may consider me the proper person in all circumstances to make the application (if applicable)

The application fee of \$ _____

The exhumation is to be supervised in strict accordance with the attached Plan of Management

by _____

employed with _____

(Funeral Director/Cemetery)

in the capacity of _____

Signature of applicant: _____

Date: _____