



**FUNERAL DIRECTORS**  
**Application for Registration of Premises**  
**or Change of Ownership**  
 Health (Burial) Regulations 1966

Invercargill City Council  
 Environmental Health Section  
 Private Bag 90104  
 INVERCARGILL  
 Phone (03) 211 1777  
 Fax (03) 211 1431

**Details of Applicant**

Applicant's Full Name/Company Name:

.....

Postal Address for service of documents:

.....

Full Name of Daytime Contact Person: .....

Daytime Contact Telephone Number: .....Mobile:.....

Email: .....

**Details of Premises**

Physical Address of Premises: .....

Trading as: .....

**Change of Ownership Details**

Date that the change of ownership occurs/has occurred.....

**Fee:** \$ 40.00 (GST inclusive) - Change of Owner

**Annual Fees:**

\$120.00 (GST inclusive) - Pre Registration / Opening fee

\$250.00 (GST inclusive) - Annual registration

Enclosed, please find fees payable totalling: \$ \_\_\_\_\_

**Applicant Signature:** .....

**Date:** .....

Office Use Only	
Approved by EHO .....	Licence No.....
Comment:.....	
.....	
Signed:.....	Date:.....