

The Council of the  
**SHIRE OF BREWARRINA**



*All communications to be addressed to the General Manager*

SHIRE OFFICE  
57 Bathurst Street  
BREWARRINA NSW 2839  
PO Box 125  
BREWARRINA NSW 2839  
Telephone: (02) 6830 5100  
Fax: (02) 6839 2100  
Email: breshire@brewarrina.nsw.gov.au

## Memorial Wall Plaque Application Form

**Before submitting this application please ensure you have included the following:**

- Plaque Permit Application Fee as per Councils' Fees and Charges
- Wording to be placed on the plaque. (150mm x 170mm)
- Details of the deceased
- Applicants details
- Death Certificate of person named on plaque
- Date plaque to be affixed to Wall - Fee as per Councils' Fees and Charges

**Deceased**

Name of Deceased .....

Date of Death.....

Applicants Name.....

Address.....

Phone.....

Date Plaque to be affixed.....

Please return by fax to the Brewarrina Shire, Administration Officer on 02 6839 2100 or post to PO Box 125, Brewarrina. NSW 2839

**EXAMPLE**

← 150mm →

Emblem Type (if required)

SMITH  
ROBERT JOHN  
01/01/1964 – 01/01/1985  
LOVED HUSBAND OF ANNE  
FATHER OF ROBERT, SUSAN & PETER  
REMEMBERED ALWAYS

170 mm

**Office Use Only**

Amount Paid:.....

Receipt Number.....