

Funeral Declaration Form

Bamaga Enterprises Limited provides funeral assistance of up to \$6000 (*Inc GST*) to families of residents of Bamaga district for more than 5 years and who are in necessitous circumstances and require assistance in helping to pay funeral related costs in relation to the deceased family member. Unless there are exceptional circumstances, funeral assistance will only be given if the deceased is:

- ✓ Recognised as Aboriginal or Torres Strait Islander descent or permanent member of community
 - ✓ A resident of Bamaga district for more than 5 years
 - ✓ Buried in Bamaga
 - ✓ The family funeral gathering is held in Bamaga

Cash will not be given to families but Purchase Orders will be issued to companies providing goods and services or payment will be made directly to such companies on presentation of invoice. Application for travel for persons to attend funeral will not be paid.

Please note the following, regarding the Funeral Funding:

All Invoices for funeral funds, must be made out to:
Bamaga Nominees Pty Ltd ABN 92 296 025 533

All decisions are subject to funding available and absolute discretion of the Board.

Please answer the following questions so that your family's eligibility can be assessed.

1. FULL NAME OF DECEASED FAMILY MEMBER:

2. NAME & RELATIONSHIP OF NEXT OF KIN:

3. WAS THE DECEASED LIVING IN BAMAGA AT THE TIME OF THEIR PASSING?	YES	NO
4. IF YES, FOR HOW MANY YEARS?		⇒ Go to 9
5. IF NO, WHERE WERE THEY LIVING (TOWN)?		
6. IF NO, WHAT YEAR DID THEY LEAVE BAMAGA?		
7. FOR WHAT PURPOSE? (e.g. Medical, Family etc)		
8. HOW MANY YEARS DID THEY LIVE IN BAMAGA BEFORE LEAVING?		
9. WILL THE DECEASED BE BURIED IN BAMAGA?	YES	NO
10. WILL THE FAMILY FUNERAL GATHERING BE HELD IN BAMAGA?	YES	NO

NECESSITOUS CIRCUMSTANCES

11. IS YOUR FAMILY IN NECESSITOUS CIRCUMSTANCES?	YES	NO
12. HAVE YOU APPLIED FOR ANY OTHER FUNDING TO HELP FOR FUNERAL COSTS?	YES	NO

I, (main contact/marigeth) declare the above to be true to the best of my knowledge.

Please provide main/marigeth's information below. Please note - Staff of Bel will only discuss funeral related costs with the name of person/marigeth noted on this form.

SIGNATURE: _____

CONTACT NO: _____

EMAIL: _____

DATE: _____

OFFICE USE ONLY

General Manager's Approval: _____

Date: _____