



METROPOLITAN  
CEMETERIES BOARD



## **SINGLE FUNERAL PERMIT INFORMATION**

***The Metropolitan Cemeteries Board (MCB) provides the following information as a guide to conducting a single funeral at Karrakatta, Pinnaroo or Fremantle Cemeteries.***

*The following package will assist you to conduct a single*

### **CREMATION**

#### ***Forms and Information***

1. Requirements for a Single Funeral Permit
2. Funeral Procedures for conducting a cremation
3. Application Form for a Single Funeral Permit
4. Application for Cremation Form
5. Identification Form (Fifth Schedule)
6. Non-MCB Forms
7. Cemetery Fees
8. Contacts
9. Medical Referees
10. Coffin Suppliers

**NOTE: If, after reading all of the information provided, you have any queries please contact us on 1300 793 109 and follow the prompts to speak to your preferred cemetery.**

**Alternatively you may call into one of our offices between 8:30am and 4:30pm to discuss any issues you may have in person.**

## **REQUIREMENTS FOR A SINGLE FUNERAL PERMIT**

*The Metropolitan Cemeteries Board requires that an applicant for a Single Funeral Permit complies with the following:*

1. All requirements detailed in the Cemeteries Act, Cemetery By- laws and conditions prescribed by the Board are met.
2. Applicant is over the age of 18 years and must provide their full given names and surname on all forms.
3. Secure Public Liability Insurance to the value of \$5,000,000.
4. Ensures that the arrangements for the safe holding of the body prior to the cremation meet the required health regulations.
5. Obtains a suitable and substantial coffin appropriate for the deceased person named on the permit. The coffin is **NOT** to be opened after arrival at the cemetery.
6. Is able to provide a suitable and respectable vehicle to be used to transport the body and coffin within the cemetery. (i.e. in the case of an infant, a sedan; for a child or adult, a hearse or station wagon).

**Please Note:** The Board may require one of its representatives to inspect the coffin and vehicle prior to their arrival for the funeral at the cemetery.

7. An **Application for Cremation Form** must be lodged at the cemetery where the funeral is to take place. The Application must be accompanied by the following documentation for **Cremation**:
  - Permit to Cremate
  - Single Funeral Permit
  - Proof of purchase of Public Liability for \$5,000 000
  - Payment of relevant cemetery fees
  - Identification Form

# **FUNERAL PROCEDURES FOR CONDUCTING A CREMATION**

## ***Before the funeral can take place:***

### **1. Medical Certificate**

It is necessary to obtain a **Medical Certificate of Cause of Death** from the doctor who certified the death. This can be done at the time the doctor certifies, or alternatively by arranging to collect it from his surgery. If the death is subject to a Coronial Investigation, a **Coroners Certificate** is issued by the Coroner's Office.

In the case of a STILLBORN death, a **Medical Certificate of Cause of Stillborn or Neonatal Death** replaces the **Medical Certificate of Cause of Death**. This is available from the Hospital where death occurred

### **2. Application for a Single Funeral Permit:**

To make an application for a Single Funeral Permit it is necessary to complete an **Application for a Single Funeral Permit** and return it to the designated cemetery office with the relevant fee and proof of securing Public Liability Insurance to the value of \$5,000,000. Once this has been approved, it is necessary for you to book the day and time of the cremation with the MCB. Please contact **1300 793 109** and ask for the Funeral Bookings clerk between 8:30am – 4:30pm Monday to Friday. You will be asked to provide the following information:

- Your full name, phone number, fax number and that you have a Single Funeral Permit and wish to book a cremation/chapel service.
- Which cemetery you require;
- Date, time, service duration and preferred chapel. This is subject to availability. Please have a second choice ready as your preferred time may not be available;
- Surname and given names of the deceased;

You will then be given a cremation application number. This will need to be referenced on all paperwork relating to the deceased.

A summary of the MCB Chapel Facilities and Availability can be found on our website.

<http://www.mcb.wa.gov.au/chapels-facilities>

### **3. Form 7: Department of Health Certificate of Medical Attendant**

If the deceased person is to be cremated it is important to advise the doctor at the same time as ordering **the Medical Certificate of Cause of Death** (or Medical Certificate of Cause of Stillborn or Neonatal Death) so that he can complete a **Certificate of Medical Attendant** (Form 7). As this form may take the doctor approximately 30-45 minutes to complete, you may be asked to collect it later. If the death has been the subject of a Coronial Inquiry then **Coroner's Certificate to Cremate** (Form 8) would replace this form and need to be completed by the Coroner.

#### **4. Form 6: Department of Health Application for a Permit to Cremate**

You will need to complete an **Application for a Permit to Cremate** (Form 6)

**Note: ALWAYS USE FULL LEGAL GIVEN NAMES AND SURNAME ON ALL FORMS.**

You will need to take the completed Form 6 and Form 7 to a **Medical Referee**. A Medical Referee is a Doctor appointed under the Cremation Act. The attached list will provide you with some of the Medical Referees within the metropolitan area. The Department of Health will provide further names if required. The Medical Referee will check both the Form 6 and Form 7 prior to issuing you with a **Permit to Cremate (Form 9)**. You must ask if there is a pacemaker; and if so, has it been removed? The Medical Referee keeps both the Form 6 and Form 7. It is normal for Medical Referees to charge for their service.

#### **5. Application for Cremation Form**

The full legal surname and given names of the deceased must be used. **The given names and surname should be the same on all forms.** Your full given names, surname and address as Administrator must be completed, signed and dated.

Please make sure you have completed Section 4 on the Application for Cremation if you have decided what arrangements you would like for the ashes. If you would like a brochure forwarded to you, giving you varied choices, please print "Brochure please" where it says "**other**". A copy of the Application for Cremation and the Permit to Cremate must be submitted to the reception office at the cemetery no later than 48 hours prior to the funeral. This ensures time for any errors to be rectified and the forms resubmitted before the funeral. Payment must be made prior to the funeral taking place.

#### **6. Coffin:**

A substantial and respectable coffin is required for cremation which bears the name of the deceased person indelibly inscribed in legible characters on a plate on the coffin lid (MCB By-law 27). A lead strip bearing the surname of the deceased is required to be placed under the name plate. It is recommended that you contact one of the local coffin distributors or alternatively a Funeral Director to purchase a recommended coffin and lead strip.

A list of coffin makers is attached. Should you have a coffin/casket made for you, it must be presented to the MCB for approval. Please make an appointment at the cemetery where funeral is to be held.

## ***On the day of the funeral:***

Check with the cemetery office for site specific instructions for arrival at the cemetery of choice.

Original paperwork required is as follows:

- **Application for Cremation**
- **Permit to Cremate** (Form 9)
- **Identification Form** (Fifth Schedule)
- **Single Funeral Permit**
- **Proof of purchase for \$5,000,000 Public Liability Insurance**

### **Identification Form – Fifth Schedule**

An **Identification Form** (5<sup>th</sup> Schedule) is required on the day of the funeral. This form is to be completed by you certifying that the body in the coffin is in fact the deceased person named on the **Medical Certificate of Cause of Death**, and whose name appears on the metal plate on the lid of the coffin. The Identification is to be done **prior** to the coffin being sealed.

## ***After the funeral:***

### **Ashes:**

The ashes are available for collection from the MCB 48 hours after cremation takes place. You can nominate to collect the ashes by selecting that option on the Application for Cremation Form or you can advise us at a later date. Please phone 1300 793 109 and follow the prompts to speak to your preferred cemetery, then follow the procedures for collection should you wish to collect on a certain day and time.

The ashes can be collected in person by the Administrator (ie the person whose name is provided on the Form 6 and Form 9). In the event that the Administrator is not available to personally collect the ashes, then a letter of authority together with acceptable identification (i.e. Drivers Licence) may be presented at the office, thus allowing a representative to collect the ashes on their behalf.

If you are undecided regarding the placement of the ashes, the MCB will hold the ashes for six (6) months free of charge and post out brochures to the Administrator. If the ashes are not placed with a memorial or collected within six months, a storage fee per month is charged. The MCB may dispose of the ashes in accordance with our By-Laws if arrangements have not been made for them to be placed or held beyond the 6 month period.

### **REGISTRATION OF DEATH:**

Under the Births, Deaths and Marriages Registration Act 1998 you are required to register the death of the deceased with the Registry Births Deaths and Marriages (Department of Justice). The registration of the death is required to be completed within fourteen days (14) of the death occurring and within seven (7) days of the funeral.

The following documentation needs to be presented to the Registry, Births Deaths and Marriages, Level 10, 141 St George's Terrace Perth during normal office hours:

- **Death Registration Form** duly completed  
(In the case of a STILLBORN, a **Birth Information Paper** must also be lodged)
- **Medical Certificate of Cause of Death, Medical Certificate of Cause of Stillborn or Neonatal or Coroner's Certificate**

Once registered the applicant may lodge a **Death Certificate Application** form with the Registrar, a fee for this document will be charged.



## APPLICATION FOR SINGLE FUNERAL PERMIT

<b>Name of Applicant:</b>		
<b>Name of Organisation</b> [If applicable]:		
<b>Address:</b>		
<b>Suburb:</b>	<b>Post Code</b>	<b>Contact Number:</b>
<b>Full Name of Deceased:</b>		
<b>Date &amp; Time of Funeral:</b>		
<b>Cemetery:</b>	<input type="checkbox"/> <b>Burial</b> <input type="checkbox"/> <b>Cremation</b> [Tick appropriate box]	

*[Applicant to complete Section A - Burial or Section B - Cremation.]*

		MCB Use
<b>Section A BURIAL</b>	<input type="checkbox"/> Medical Certificate <input type="checkbox"/> Neo-Natal Certificate <input type="checkbox"/> Coroner's Order <i>[Tick relevant box]</i>	<input type="checkbox"/> Attached
	Completed Identification Form <i>[Fifth Schedule Metropolitan Cemeteries Board By-law 1992]</i>	<input type="checkbox"/> Attached
	Application for Burial <i>[Application for Burial form to be completed and attached]</i>	<input type="checkbox"/> Attached
	Digging Requisition <i>[Digging Requisition to be completed and faxed to MCB/ Attach original]</i>	<input type="checkbox"/> Attached

<b>Section B CREMATION</b>	<input type="checkbox"/> Medical Certificate <input type="checkbox"/> Neo-Natal Certificate <input type="checkbox"/> Coroner's Order <i>[Tick relevant box]</i>	<input type="checkbox"/> Attached
	Permit to Cremate <i>[Form 9 - Cremation Regulations 1954]</i>	<input type="checkbox"/> Attached
	Completed Identification Form <i>[Fifth Schedule or when unable to identify, Sixth Schedule Form]</i>	<input type="checkbox"/> Attached
	Application for Cremation <i>[Application for Cremation completed and attached]</i>	<input type="checkbox"/> Attached

<b>Section C COFFIN</b>	<input type="checkbox"/> The coffin/casket was purchased <input type="checkbox"/> Is home made but conforms to the Board's minimum requirements	
	Purchased from (if applicable):	
	The coffin/casket is: Length:                                  mm      Width:                                  mm      Height:                                  mm	
	<input type="checkbox"/> The name of the deceased is stamped/engraved on a metal plate which is attached to the lid.	
	<input type="checkbox"/> A lead strip bearing the name of the deceased is enclosed under the metal plate.	

<b>Section D VEHICLE</b>	The following vehicle will be used to transport the coffin/casket containing the deceased		
	Make: _____	Type: _____	Registration: _____
	Alternatively, I will be using an approved vehicle owned by:		
	Address: _____		
	Make: _____	Type: _____	Registration: _____

<b>Section E INSURANCE</b>	<b>A Certificate of Currency of Public Liability and where applicable, Workers Compensation must be attached</b>	
	Public Liability Insurance Cover provided by [Insurer]:	<input type="checkbox"/> Attached
	Policy No:	<input type="checkbox"/> Verified
	Worker's Compensation Insurance provide by [Insurer] (if applicable):	<input type="checkbox"/> Attached
	Policy Number:	<input type="checkbox"/> Verified

My signature hereunder signifies my acceptance of the terms and conditions relating to the conduct of a funeral pursuant to a *Single Funeral Permit [as outlined on the reverse side of this form]* and the acceptance of my responsibilities under the *Cemeteries Act 1986* and the *Metropolitan Cemeteries Board By-law 1992*, and where applicable, the *Cremation Act 1929* and the *Cremation Regulations 1954*. I agree to be bound by the terms and conditions of this permit.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Ensure copy of approved application is given to Client

# RESPONSIBILITIES OF HOLDER OF SINGLE FUNERAL PERMIT

*[For further information please refer to the Board's publication "How to Conduct a Funeral under a Single Funeral Permit"]*

## Definitions

"Burial" includes entombment in a Mausoleum Crypt.

## What are my responsibilities under a Single Funeral Permit?

As the holder of a Single Funeral Permit you are responsible as if you were a licensed funeral director for taking charge of the funeral arrangements.

There are four main categories:

1. *Identification and preparation of the deceased*
  - a. Ensuring the identification of the deceased - Fifth Schedule Identification Form
  - b. Arranging the purchase or the provision of an approved coffin or casket
  - c. Preparation of the deceased and placement in an approved coffin or casket
2. *Planning the funeral*
  - a. Making a funeral booking - nomination of cemetery - Telephone 1300 793 109
  - b. Booking of venues (Use of a Chapel and or Condolence Lounge)
  - c. Placing relevant notices in the local newspaper, and arranging any floral arrangements and or decorations.
  - d. Completing all requisite forms and applications, including obtaining all relevant permits and approvals
  - e. Ensuring the purchase of a:
    - i. new grave or the use of an existing grave, where applicable, and gaining any necessary approvals or, where necessary, the provision of a Statutory Declaration (applicable if ashes to be placed in family grave; or
    - ii. new memorial location or the use of an existing memorial location, for the placement of ashes, if placing ashes in a cemetery
3. *Making adequate transport arrangements*
  - a. Ensuring provision of a suitable vehicle for the conveyance of the coffin/casket containing the deceased, and
  - b. Arranging transport for mourners
4. *Conducting the funeral on the day*
  - a. Presentation of all relevant approvals and applications to the Board prior to the allotted time for the funeral
  - b. Conduct of the funeral procession and the control of all participants
  - c. Ensuring adherence to time allocated for chapel, condolence lounge and or graveside service (burial)

## **Terms and Conditions**

The holder of a Single Funeral Permit shall:

1. Conduct the funeral for the deceased in compliance with the Cemeteries Act 1986 and the Metropolitan Cemeteries Board By-law 1992, and where applicable, the Cremation Act 1929 and the Cremation Regulations 1954.
2. Submit to the Metropolitan Cemeteries Board (the Board) all relevant forms required to ensure the proper conduct of a funeral in accordance with these requirements.
3. Make the necessary booking for a funeral, signifying whether it is a burial or cremation, telephone 1300 793 109.
4. Provide a suitable coffin or casket for burial, or if hand made, ensuring compliance with the Board's Minimum Standards for a Coffin or Casket.
5. Be responsible for the custody of the deceased, preparation of the body of the deceased for burial or cremation, and for ensuring the identification of the deceased prior to their placement in a coffin.
6. Affix to the coffin a metal plaque on which the name of the deceased is suitably stamped or engraved.
7. Enclosing under this plate a lead strip on which the surname of the deceased in letters no less than 10mm in height are stamped.
8. Be punctual on arrival at the Cemetery at the time allocated for the funeral to be conducted.
9. Ensure the procession moves off on time and that the use of the chapel, condolence lounge and/or gravesite service is concluded within one hour of the allocated time.

## **Further Information**

Further information can be obtained by contacting one of our Client Services Officers on 1300 793 109 or calling into one of our cemetery offices located at Fremantle, Karrakatta and Pinnaroo.





METROPOLITAN  
CEMETERIES BOARD



Case No: MCB-  
Cemetery: \_\_\_\_\_

## APPLICATION FOR CREMATION AND INSTRUCTION FOR ASHES



### CEMETERY CONTACT

**TELEPHONE 1300 93 109** Dial 8 as soon as you are connected – no need to wait for voice prompt

<b>SECTION 1</b> Deceased's Details	Surname:		Alias:		
	First Names:		Alias:		
	Address:				
				Post Code:	
	Date of Death	/	/	Age	Male <input type="checkbox"/> Female <input type="checkbox"/> Unspecified <input type="checkbox"/>
	Cremation Agreement	Occupation		Religion	
	Coffin/Casket Type:		Size: (L)	(W)	(H)
	Combined weight:		Kilos	Pacemaker* removed? Yes <input type="checkbox"/> N/A <input type="checkbox"/>	

\* Funeral Directors are responsible for removing pacemaker or other potentially explosive medical devices prior to cremation.

<b>SECTION 2</b> Service Details	Day:	Date: / /	Start time:	Duration:
	Direct Delivery <input type="checkbox"/>	Chapel:		Private <input type="checkbox"/>
	<b>Authority to charge Funeral Director and Branch</b>			
	Company:	Branch:	Name of Arranger:	
	Mobile Contact Number:		Signature:	Date: / /

<b>SECTION 3</b> Applicant/ Administrator's Details	Surname:		Title:	
	First Names:			
	Address:			
				Postcode:
	Mobile Number: ( )		Email:	
No of Cremation Permit:		Date of Permit to Cremate: / /		

<b>SECTION 4</b> Ashes	<b>MCB to hold ashes – Administrator to contact MCB:</b> <input type="checkbox"/>
	<b>Ashes To be Collected by Administrator:</b> <input type="checkbox"/>
	<b>Disperse ashes:</b> [No record or fee] <input type="checkbox"/>

*Recycling of Metals:* Unless otherwise instructed prior to cremation, all remaining metal parts will be recycled. Please advise your Funeral Director of your request.

My signature below certifies the accuracy of the information provided and my instructions as the Administrator.

**Applicant's Signature:** \_\_\_\_\_ Date: / /

**This funeral application was signed via reliable electronic means. The applicant's signature and intent has been verified.**

<b>MCB Use Only</b>	Received: Permit <input type="checkbox"/> I.D. <input type="checkbox"/>	Ash details updated: <input type="checkbox"/>	Inscription Letter <input type="checkbox"/> / /
	Boarding Passes: #	Input Officer:	
	Charges Invoiced: <input type="checkbox"/>	Audit Officer:	Date: / /
	Cremation w/chapel <input type="checkbox"/> Cremation D/D <input type="checkbox"/> Saturday <input type="checkbox"/> Late Fee <input type="checkbox"/> Chapel ½ hr <input type="checkbox"/> Extra Chapel <input type="checkbox"/>	Purchase of Grant <input type="checkbox"/> Use of Grave (Non-renewal) <input type="checkbox"/> Family Attend <input type="checkbox"/> Other _____	
	Service fees: \$	INV-	Date: / /
	Contract fees: \$	INV-	Date: / /

Application for Cremation v12 December 2020

**FIFTH SCHEDULE**  
**CEMETERIES ACT 1986**  
**METROPOLITAN CEMETERIES BOARD BY-LAW**  
**CERTIFICATE OF IDENTIFICATION**

I,.....

of .....

Hereby certify that on the .....day of .....

..... at .....

I identified the body of a deceased person as that of.....

.....

The body was in a coffin bearing the name plate/inscription marked

.....

Signed: .....

Witness: .....

## **Non MCB Forms**

### **Form 6 – Application for Permit to Cremate**

This form is used to submit an application to a medical referee for permission for a cremation to be carried out.

This form can be obtained from the Department of Health website.

[https://ww2.health.wa.gov.au/Articles/A\\_E/Burial-and-cremation](https://ww2.health.wa.gov.au/Articles/A_E/Burial-and-cremation)

### **Death Certificate Application**

This form is used to register the death with Births Deaths and Marriages and can be found on their website.

<https://www.wa.gov.au/government/document-collections/forms-registry-of-births-deaths-and-marriages>

### **Guidelines for the preparation of the deceased for burial or cremation**

This information can be found on the Department of Health website.

[https://ww2.health.wa.gov.au/Articles/A\\_E/Burial-and-cremation](https://ww2.health.wa.gov.au/Articles/A_E/Burial-and-cremation)

# Single Funeral Permit Cemetery Fees

1 July 2024 to 30 June 2025

<b>Description:</b>	<b>\$</b>
Single Funeral Permit	727.00
<b>Graves:</b>	
Gravesite / Grant: Lawn	2,631.00
Gravesite / Grant: Monumental Area	2,527.00
Gravesite / Grant: Children's Memorial Garden (2 interments, under 13 only)	1,246.00
<b>Burial:</b>	
Adult Interment	1639.00
Child Interment (under 13 years)	733.00
Infant Interment	312.00
<b>Cremation: (Prices include Chapel and Lounge)</b>	
Adult Cremation 60 min any chapel	1315.00
Child Cremation 90 min Any Chapel	633.00
60 min Any Chapel	539.00
Infant Cremation 90 min Any Chapel	257.00
60 min Small Chapel	171.00
<i>Please enquire for more information for chapel size 1300 793 109</i>	
<b>Direct Cremation: (No Service)</b>	
Adult Cremation without Chapel and Lounge	1315.00
Child Cremation without Chapel and Lounge	539.00
Infant Cremation without Chapel and Lounge	50.00
<b>Other:</b>	
Selection of Grave	249.00
Saturday Morning Interment / Entombment Surcharge	864.00
Interment of Oversize Casket: monumental areas only	407.00
Saturday Morning Cremation / Chapel Surcharge	864.00
Additional Chapel / Lounge Time (30 minutes)	134.00
Late to Arrive or Depart for Cremation (after 10 minutes)	330.00
<b>Non- MCB Fees (approximate cost only)</b>	
<i>Permit to Cremate (issued by Medical Referee) approx.</i>	<i>\$72.60 - \$118.80</i>
<i>Death Certificate</i>	<i>\$44.00 - \$50.00</i>
<ul style="list-style-type: none"> <li>• <i>Ordinary Death Certificate - approx. 3- 5 days</i></li> <li>• <i>Urgent Death Certificate is available in 24 hours</i></li> </ul>	

## **Contacts:**

The following is a list of contacts that may be useful.

<b>DOCUMENTS</b>	<b>OBTAINABLE FROM</b>
Medical Certificate of Cause of Death	Issuing Doctor
Coroner's Certificate	Coroner's Court 172 St George's Terrace PERTH WA Telephone: 9321 2491
Perinatal Certificate	Hospital where death occurred
Application for a Permit to Cremate (FORM 6)	Health Department Office of Executive Director 2 <sup>nd</sup> Floor, B Block 189 Royal Street EAST PERTH WA Telephone: 9222 4222
Permit to Cremate (FORM 9)	Provided by Medical Referee
Death Registration Paper	Registrar General, Births Death & Marriage Level 10, 141 St George's Terrace PERTH WA Telephone 9264 1555 (closes at 4:30pm)

## **Medical Referees:**

*PLEASE NOTE - MEDICAL REFEREES CHARGE FOR THEIR SERVICES and THESE NAMES ARE SUBJECT TO CHANGE*

<p>Dr David DAY Dr Denis LAWRANCE Dr Gary WHITE Dr Jacob ADESINA</p> <p>Armitage Medical Centre 2968 Albany Highway KELMSCOTT WA</p> <p>Tel. 93904444</p>	<p>Dr Simon TORVALDSEN</p> <p>779 Beaufort Street MOUNT LAWLEY WA</p> <p>Telephone: 9272 5533</p>
<p>Dr Nicholas STANLEY-CARY Swan Medical Great Eastern Highway MIDLAND WA</p> <p>Tel. 92746100</p>	<p>Dr Elizabeth BUSSELL Garden City Medical U1/177-179 Davy Street BOORAGOON WA Tel. 93169969 Tel. 93219133 (AH)</p>
<p>Dr Kim YEOH Prendiville Avenue Medical Centre Unit 1/4 Prendiville Avenue OCEAN REEF WA</p> <p>TELEPHONE: 9300 8800</p>	<p>Dr Robert DOERKSEN 177-179 Davey Street BOORAGOON WA</p> <p>Telephone: 9316 9969</p>
<p>Dr W CHAPMAN Parmelia Medical 1 Sutherland Parade PARMELIA WA</p> <p>Tel. 94394411</p>	

## **Coffin Suppliers:**

Prices available on application to Funeral Director or coffin distributor

Coffins are available to purchase from some Funeral Directors. A list of Funeral Directors is found in the Yellow Pages Directory.

Some coffin distributors will also sell to the public, however they need evidence that you are applying for a Single Funeral Permit. Producing an Application for a Single Funeral Permit is usually sufficient.

**NOTE: In all cases when purchasing a coffin, you will need to have a suitably enclosed vehicle, together with a cover for the coffin, in which to transport the coffin. Coffins cannot be transported uncovered, on top of a vehicle, in a trailer or open backed vehicle.**

### ***Higgins Manufacturing Australia Pty Ltd***

417 Victoria Road  
MALAGA WA  
Telephone: 9209 1833

### **H H WEBB & Co**

Unit 1, 7 Forge Street  
WELSHPOOL WA  
Telephone: 9358 1400