

# **Cremation Regulations 1954**

Compare between:

[03 Jul 2019, 04-i0-00] and [08 May 2021, 04-j0-00]

#### Cremation Act 1929

# **Cremation Regulations 1954**

#### 1. Citation

These regulations may be cited as the *Cremation Regulations*  $1954^{+}$ .

#### 2. Commencement

These regulations shall come into operation on 6 September 1954.

#### 3. Term used: nearest surviving relative

In these regulations —

*nearest surviving relative* in relation to a deceased person, means the first person who is available from the following persons in the order of priority listed —

- (a) a person who, immediately before the death, was living as
  - (i) the spouse of the person; or
  - (ii) a de facto partner of the person, and who is of or over the age of 18 years;
- (b) a person who, immediately before the death, was the spouse of the person;
- (c) a son or daughter, who is of or over the age of 18 years, of the person;
- (d) a parent of the person;

(e) a brother or sister, who is of or over the age of 18 years, of the person.

[Regulation 3 inserted: Gazette 24 Sep 2002 p. 4767.]

# Part I — Application for licence to use and conduct a crematorium

#### 4. Application for licence

- (1) Every application under section 4(1) of the Act for a licence to use and conduct a crematorium shall be made in writing and shall be made in accordance with Schedule 1 Form 1. It shall be signed by the chairman of the body making the application, and shall be accompanied by statutory declaration or other evidence as required by section 4(2) of the Act, and the fee prescribed in Schedule 2 item 1.
- (2) The application shall be submitted to the Chief Health Officer who shall ensure that it is in order before forwarding it to the Governor.
- (3) If the licence is not granted the fee shall be returned to the applicant.

[Regulation 4 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249; 2 Jul 2019 p. 2646 and 2647.]

#### 5. Form of licence

Every licence granted shall be in accordance with Schedule 1 Form 2 or Form 3 as the case may require.

[Regulation 5 amended: Gazette 2 Jul 2019 p. 2646.]

#### 6. Compliance certificate

(1) Where in respect of a licence to use and conduct a crematorium a certificate by the Chief Health Officer pursuant to section 4(3) of the Act is necessary before the licence is valid and effective, application for a certificate shall be made in writing by the licensee named in the licence, in accordance with Schedule 1 Form 4, and shall be accompanied by the inspection and certificate fee prescribed in Schedule 2 item 2.

r. 7

- (2) Upon receipt of an application under this regulation together with the prescribed fees, the Chief Health Officer shall cause an inspection to be made of the premises and apparatus referred to in the licence in order to satisfy himself that the certificate applied for may be properly given.
- (3) If after such inspection the Chief Health Officer is not satisfied that a certificate can properly be given he shall refuse to give the certificate, and shall refund the fee to the licensee.

[Regulation 6 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249; 2 Jul 2019 p. 2646 and 2647.]

#### 7. Form of certificate

Where the Chief Health Officer gives a certificate pursuant to an application made in accordance with regulation 6, the certificate shall be in accordance with Schedule 1 Form 5.

[Regulation 7 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249-50; 2 Jul 2019 p. 2646.]

# Part II — Maintenance and inspection of crematoria

#### 8. Crematoria to be maintained

Every crematorium and the fittings, works and apparatus used in connection therewith shall at all times be —

- (a) maintained in good condition, repair and working order;
- (b) kept in a clean, sanitary and orderly condition;
- (c) provided with a number of attendants sufficient for the compliance with the requirements of paragraphs (a) and (b) to the satisfaction of the Chief Health Officer.

[Regulation 8 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249-50.]

#### 9. Inspection

- (1) The licensee of every crematorium shall at any time and from time to time permit the crematorium and the register to be inspected by the Chief Health Officer or any persons authorised in writing by him, or any Inspector of Police.
- (2) Any person authorised by the Chief Health Officer and any Inspector of Police who makes an inspection of a crematorium shall forthwith report to the Chief Health Officer any breach of these regulations which is observed by him.

[Regulation 9 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249-50.]

#### 10. Notice requiring work to be carried out

On receipt of a report that these regulations are not being complied with at any crematorium, the Chief Health Officer may give written notice thereof to the licensee of the crematorium. The notice may specify the works to be carried out and fix a time within which the works shall be completed. The licensee shall comply with any such notice.

Part II Maintenance and inspection of crematoria

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[Regulation 10 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249-50.]

# Part III — Application for permit to cremate

#### 11. Form of permit application

Every application for a permit to cremate shall be made in accordance with Schedule 1 Form 6.

[Regulation 11 amended: Gazette 2 Jul 2019 p. 2646.]

#### 12. Other requirements for permit

Every application to cremate made in accordance with regulation 11 shall be accompanied by the fee prescribed in Schedule 2 item 3 and a certificate in accordance with —

- (a) Schedule 1 Form 7, completed by a medical practitioner; or
- (b) Schedule 1 Form 8, completed by the Coroner; or
- (c) the *Coroners Regulations 1997* Schedule 1 Form 4, completed by the Coroner.

[Regulation 12 inserted: Gazette 29 Jun 2012 p. 2944-5; amended: Gazette 2 Jul 2019 p. 2646 and 2647.]

#### Part IV — The medical referee

#### 13. Referee to be medical practitioner

No medical practitioner shall be appointed as a medical referee unless he has engaged in the practice of medicine for not less than 5 years.

#### 14. Conditions for medical referee

In performing his duties, the medical referee shall comply with the following conditions: —

- (1) Before permitting any cremation he shall ensure that all documents are completed in accordance with the provisions of the Act and that there is nothing in the Act to debar him from issuing a permit, and in particular is satisfied that all of the requirements of sections 8, 8A and 8B of the Act have been complied with.
- (2) A medical referee shall provide reasonable facilities, for persons wishing to make application to cremate, between the hours of 9 a.m. and 5 p.m. Mondays to Fridays, inclusive, and between the hours of 9 a.m. and noon on Saturdays, unless prevented by urgent circumstances. He shall, when available, deal with any urgent application at other times, in which case he shall be entitled to receive the higher prescribed fee.
- (3) Forthwith after issuing a permit to cremate, the medical referee shall forward a copy of the permit marked with the permit number and date to the Chief Health Officer.
- (4) If the medical referee refuses to give a permit to cremate he shall give notice of his decision to the applicant and shall advise him of his right to apply to the State Administrative Tribunal for a review of the decision. He need not advise the applicant of his reasons for refusing to give the permit, but shall forthwith notify the Chief Health Officer of his decision, and the reasons therefor.

Part IV

- (5) Every permit to cremate shall be in accordance with Schedule 1 Form 9.
- (6) In the case of the body of a person who has died in Australia but in any place outside the State of Western Australia, the medical referee may accept, in lieu of the forms prescribed, documents which substantially contain the information required to be supplied, and signed by persons having the status of medical practitioner or coroner, as the case may be, in the place where the person died.
- (7) The medical referee shall carefully preserve all documents received by him in the discharge of his duties, and shall deliver to the Chief Health Officer once per year any documents over 2 years old.
- (8) If any medical referee is to be absent from his usual address for more than 24 hours at one time, he shall notify the Chief Health Officer of the fact.

[Regulation 14 amended: Gazette 29 Jun 1984 p. 1781; 30 Dec 2004 p. 6933; 10 Jan 2017 p. 249-50; 2 Jul 2019 p. 2646.]

#### Part V — Cremation elsewhere than in a crematorium

#### 15. Cremation elsewhere for religious reasons

If application is made in accordance with Part III for the cremation of a deceased person of Asiatic race who belonged to a religious denomination, the tenets of which require the burning of the body elsewhere than in a crematorium, the medical referee may give his consent if the place at which the cremation is to take place, and the arrangements for the cremation are approved by the Chief Health Officer. Approval may be subject to such conditions as the Chief Health Officer deems necessary.

[Regulation 15 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 247.]

#### 16. Cremation in cemetery

When such a cremation is carried out in a cemetery the person responsible for the arrangements shall comply with any directions, which may be given by the cemetery authority.

#### 17. Permission required for cremation elsewhere

No cremation shall be permitted elsewhere than at a crematorium except where permission is granted under this Part or, unless the Chief Health Officer issues a direction pursuant to the powers vested in him under the *Health (Miscellaneous Provisions) Act 1911* or the *Public Health Act 2016*.

[Regulation 17 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 247 and 249-50; 19 Sep 2017 p. 4884.]

#### Part VI — Miscellaneous

#### 18. Register of cremation to be kept

Every licensee of a crematorium shall keep a register of cremations in accordance with Schedule 1 Form 11, and shall enter therein all particulars for which the form provides. The entries shall be made in relation to every cremation carried out in the crematorium, and shall be made immediately after the cremation, except in the case of those entries referring to the disposal of ashes.

[Regulation 18 amended: Gazette 2 Jul 2019 p. 2646.]

#### 19. Inspection of register

The register of cremations shall be open to inspection by any person during ordinary business hours of the licensee, on payment of 10 cents.

[Regulation 19 amended: Act No. 113 of 1965 s. 8(1).]

#### 20. Notice of cremation to be given

The licensee of a crematorium shall, within 24 hours after a cremation is carried out, give notice thereof to the Chief Health Officer and the Registrar General, in accordance with Schedule 1 Form 12.

[Regulation 20 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 249-50; 2 Jul 2019 p. 2646.]

#### 20A. Post mortem certificate

A certificate of a medical practitioner who has conducted a post mortem examination may be in accordance with Schedule 1 Form 13.

[Regulation 20A inserted: Gazette 17 Dec 1954 p. 2252; amended: Gazette 2 Jul 2019 p. 2646.]

# Schedule 1 — Forms

[r. 4(1), 5, 6(1), 7, 11, 12(a) and (b), 14(5), 18, 20 and 20A]

[Heading inserted: Gazette 2 Jul 2019 p. 2645.]

#### Form 1

Western Australia

Cremation Act 1929

# APPLICATION FOR A LICENCE TO USE AND CONDUCT A CREMATORIUM

# Regulation 4

To His Excellency the Governor of Western Australia:

1. The trustees and the controlling authority of the
Cemetery, being a public cemetery appointed under the <i>Cemeteries Act 1897</i> <sup>2</sup> (or the
being an association incorporated under the Associations.
Incorporation Act 1895 32, established and constituted in connection with the cremation
of dead human bodies, and holding a certificate under the hand of the Chief Health
Officer that the association is an association to which the provisions of section 4 of the
Act may reasonably be extended), hereby apply for a licence to use and conduct a
crematorium under and in accordance with the provisions of the Act, at and in the
cemetery at the site next mentioned.
2. The buildings to be used as the crematorium have been erected upon (or
will be erected upon) that portion of the area of the said cemetery which has been
defined and set apart by the trustees of the cemetery as a site for the crematorium,
namely: —
and shown on the attached plan.
3. This application is accompanied by the statutory declaration of, of
in the State of Western Australia,
section 4(2) of the Act, and by the sum of the fee for the licence
hereby applied for.
4. The applicant undertakes that within one year from the date on which the
licence is granted they (or it) will obtain the certificate of the Chief Health Officer
required by section 4(3) of the Act.
Dated theday of
For and on behalf of the applicant,
Chairman.

[Form 1 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 247-8.]

Western Australia

Cremation Act 1929

Regulation 5

# LICENCE TO USE AND CONDUCT A SPECIFIED CREMATORIUM

Whereas by an application bearing the date, day of, 20,
, 20,
being the trustees duly appointed under the provisions of the <i>Cemeteries Act 1897</i> <sup>21</sup> , as
the Trustees and controlling body of the
a public cemetery duly proclaimed under the provisions of the <i>Cemeteries Act</i> $1897^{\frac{2}{2}}$ ,
applied to His Excellency the Governor in Council for a licence under the provisions of
the Cremation Act 1929, to the trustees and controlling body of the said
Cemetery, upon a site thereon, as defined in the said application,
and whereas the applicants have satisfied His Excellency the Governor in accordance
with the provisions of section 4 of the <i>Cremation Act 1929</i> , that the said trustees or controlling body of the said
to use the proposed site in the said cemetery for the purpose of a crematorium, that the
crematorium not yet being established the Chief Health Officer has approved of the
plans and specifications of the proposed building, fittings, works and apparatus to be
built and used for the purposes of the said crematorium, and that in all other respects the
requirements of section 4 of the <i>Cremation Act 1929</i> , have been duly complied with:
Now, therefore, His Excellency the Governor, acting with the advice and consent of the
Executive Council, and in exercise of the powers conferred by section 4 of the
Cremation Act 1929, doth by these presents grant to the trustees and controlling body
for the time being and from time to time of the
subject as hereinafter provided, a licence to use and conduct a crematorium within the
said
aforementioned application, to be established in accordance with the plans and
specifications of the proposed building, fittings, works, and apparatus which have been approved by the Chief Health Officer as aforesaid: Provided that the licence hereby
granted shall be held and the said crematorium shall be used and conducted under and
subject to the provisions of the <i>Cremation Act 1929</i> , and that the licence hereby granted
shall not have any validity or effect unless and until the Chief Health Officer shall
certify within one year of the granting of this licence that the buildings, fittings, works,
and apparatus have been erected and installed in accordance with the plans and
specifications which have been approved by him as aforesaid and that the regulations
have been complied with.

# Cremation Regulations 1954 Forms Schedule 1

Form 2
Dated at Perth in the State of Western Australia this
By His Excellency's Command,
Minister.
[Form 2 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 248.]

#### Western Australia

Cremation Act 1929

#### LICENCE TO USE AND CONDUCT A SPECIFIED CREMATORIUM

Regulation 5

Whereas by an application bearing the date
an association duly incorporated under the provisions of the <i>Associations Incorporation Act 1895</i> <sup>32</sup> , for the purpose of conducting a crematorium holding a certificate under the hand of the Chief Health Officer that the association aforesaid is an association to which the provisions of section 4 may reasonably be extended, applied to His Excellency the Governor in Council for a licence under the provisions of the <i>Cremation Act 1929</i> , for the said association to use and conduct a crematorium within the boundaries of land, no being part of a public cemetery, being the whole (or portion) of
Dated at Perth in the State of Western Australia, this

By His Excelle	ncy's Command.
	Minister for Health.
[Form 3 amended: Gazette 29 p. 248.]	9 Jun 1984 p. 1781; 10 Jan 2017

#### Western Australia

Cremation Act 1929

# APPLICATION FOR CERTIFICATE OF CHIEF HEALTH OFFICER TO GIVE EFFECT TO A LICENCE GRANTED TO USE AND CONDUCT A CREMATORIUM

#### Regulation 6

[Form 4 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017 p. 248.]

#### Western Australia

Cremation Act 1929

# CERTIFICATE OF THE CHIEF HEALTH OFFICER GIVING EFFECT TO A LICENCE TO USE AND CONDUCT A CREMATORIUM

#### Regulation 7

Whereas a licence to use and conduct a crematorium upon a site defined and set aside for the purpose within the
and whereas it is provided that the licence shall not have any validity or effect unless and until the Chief Health Officer shall certify within one year from the granting of the licence that the necessary buildings, fittings, works and apparatus have been erected and installed in accordance with the approved plans and specifications, and that the relative regulations have been complied with: Now, therefore, I  Chief Health Officer do hereby
certify that the buildings, fittings, works and apparatus have been duly erected and installed, in accordance with the approved plans and specifications, at the site mentioned in the licence, and that the relative regulations have been complied with.
Dated theday of, 20
Chief Health Officer
[Form 5 amended: Gazette 29 Jun 1984 p. 1781; 10 Jan 2017

p. 248-9.]

Application for Permit to Cremate		Cremation Act 1929 Form 6	
Applicant	Name	1	
	Address		
Deceased	Name		
	Address		
	Date of birth / Male/Female/Unspecified		
	Marital status		
Occupation			
(*"Nearest	Nearest surviving relative* (if known)		
surviving relative" is	Name		
explained at	_		
the end of this			
form.)	Usual doctor Name Address  Doctor(s) who attended deceased during his or her last illness Name — —		
	Address		
Instructions	Did the deceased leave any written direction	and about how his or har	
from	Did the deceased leave any written direction remains were to be dealt with?	ons about now his of her	
deceased	□ No		
	☐ Yes. Give details		

Objections	Do you know of anyone who objects to the deceased's remains being cremated?  □ No □ Yes. Give detail of that person:  Name  Relationship to deceased  Address
Coroner	Has the Coroner conducted an investigation or inquest into the deceased's death?  ☐ Yes ☐ No ☐ Unsure
Applicant's relationship to deceased  (*"Nearest surviving relative" is explained at the end of this form.)	<ul> <li>□ Administrator of the deceased</li> <li>□ Nearest surviving relative* of the deceased</li> <li>□ Other</li> </ul>
Details of death	Date / /20 Time a.m./p.m.  Place where deceased died  ☐ Home  Address ☐ Hospital  Address ☐ Other  Address
	Do you know, or have reason to suspect, that the deceased's death was directly or indirectly due to any of the following? (tick if yes)  □ violence □ poison □ privation or neglect □ medical procedure □ drowning □ suffocation □ burns

	Do you have any reason to suppose that an examination of the deceased's remains may be desirable?  No Yes. Give details		
Other applications	Have you, or anyone else that you know of, previously applied for a permit to cremate the deceased's remains?  No Yes. Give details of previous application Made by Date/20 Medical Referee to whom it was made		
Signature of applicant	Signature		
	Date / /20		
Statutory declaration	I, [name, address and occupation of person making the declaration]		
(This section	sincerely declare as follows —		
not to be completed by administrator)	That I make this application instead of an administrator because [give reasons]		
	This declaration is true and I know that it is an offence to make a declaration knowing that it is false in a material particular.		
	This declaration is made under the Oaths, Affidavits and Statutory Declarations Act 2005 at [place] on [date] by		
	[Signature of person making the declaration]		
	in the presence of		
	[Signature of witness authorised under the Oaths, Affidavits and Statutory Declarations Act 2005]		
	[Name of authorised witness and qualification as such a witness]		

Medical	Permit No.
referee	Date / /20
(For office use	Medical Referee
only)	Signature
	Name

The **nearest surviving relative** of a deceased person, is the first person who is available from the following persons in the order of priority listed —

- (a) a person who, immediately before the death, was living as
  - (i) the spouse of the deceased; or
  - (ii) a de facto partner of the deceased and who is at least 18 years of age;
- (b) a person who, immediately before the death, was the spouse of the deceased;
- (c) a son or daughter of the deceased who is at least 18 years of age;
- (d) a parent of the deceased;
- (e) a brother or sister of the deceased who is at least 18 years of age.

[Form 6 inserted: Gazette 4 Apr 2008 p. 1300-2; amended: Gazette 8 Feb 2013 p. 866; 9 Feb 2016 p. 371.]

Certificate of Medical Practitioner		Cremation Act 1929 Form 7		
Certificate to be completed by doctor who attended deceased prior to death.				
	Add additional pages if more space is required.			
Attach copies of all relevant laboratory reports, results, certificates etc.				
Deceased	Name			
	Address			
	Date of birth / / Age			
	Marital status Male/Female/Unspecified			
	Occupation			
Doctor	Name			
	Address			
	Are you a spouse, de facto partner or relative of the deceased?			
	No			
	Yes. Nature of relationship			
	As far as you are aware, do you have a pecuniary interest in the deceased's estate or any other pecuniary interest in the deceased's death?			
	No			
	Yes. Give details			
	Were you the deceased's usual doctor?			
	No Yes			

Recent care of deceased	During the 4 weeks prior to death did the deceased receive medical or nursing care?				
	No				
	Yes. Where was the deceased cared for?				
	Hospital				
	Nursing home				
	Home				
	Other				
	If cared for at home or other place, who provided care?				
	Professional health care providers				
	Relatives, friends, others				
	Give names and relationship to the deceased				
	Did you attend the deceased during his or her last illness?				
	No Yes Since what date? / /20				
	Did any other doctor(s) attend the deceased during his or her last illness?				
	No				
	Yes. Give names				
Last illness	Brief clinical history of last illness including diagnoses and events leading to death.				

Place where the deceased died — Home						
Home						
Address						
Hospital						
Address						
Other						
Address						
Were you present when the deceased died?						
Yes						
No. When did you last see the deceased alive?						
Date / /20 Time a.m./p.m.						
Did you examine the deceased's body after death?						
No						
Yes. Give details						
Do you have any reason to suppose that a further examination the deceased's remains may be desirable?	on of					
No						
Yes. Give details						
Cause of death Was a post mortem performed?						
No						
Yes. Give details of results						

(* If a Medical Certificate of Cause of Death is attached, answers are not required to these questions.)	*Did you sign the Medical Certificate of Cause of Death?  Yes  No. Name of the doctor who signed the certificate					
	*Direct cause of death					
	*Antecedent causes of death (if any)					
	*Conditions contributing to or accelerating death (if any)					
Clinical	Do you know, or have reason to suspect, that the deceased's death was directly or indirectly due to any of the following? (tick or circle if yes)					
observations	death was directly or indirectly due to any of the following? (tick					
observations	death was directly or indirectly due to any of the following? (tick					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence poison					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence  poison  privation or neglect					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence  poison  privation or neglect  medical procedure					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence poison privation or neglect medical procedure drowning					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence poison privation or neglect medical procedure drowning suffocation					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence  poison  privation or neglect  medical procedure  drowning  suffocation  burns  In view of the deceased's lifestyle and health, do you have any doubts about the character of the deceased's illness or cause					
observations	death was directly or indirectly due to any of the following? (tick or circle if yes)  violence  poison  privation or neglect  medical procedure  drowning  suffocation  burns  In view of the deceased's lifestyle and health, do you have any doubts about the character of the deceased's illness or cause of death?					

# Safety of cremation

At the time of death was the deceased fitted with a cardiac pacemaker, defibrillator or other battery operated implant or device?

Yes No/unknown

(If yes, has it been removed? Yes/No)

Had the deceased received any of the following radioactive treatments?

Palliation for bone metastases

• Strontium-89 injection during the 12 months prior to death

No Yes\*

• Radium-223 injection during the 2 months prior to death

No Yes'

• Samarium-153 injection during the 3 weeks prior to death

No Yes\*

• Rhenium-188 injection during the week prior to death

No Yes\*

Infusion for liver cancer or metastases

• Yttrium-90 or Rhenium-188 during the 2 weeks prior to death

No Yes\*

Therapy for thyroid cancer, endocrine tumours, or non-Hodgkin's lymphoma

• Iodine-131 (injection or oral) during the week prior to death

No Yes\*

 $Radioactive\ implant\ (permanent)\ e.g.\ for\ prostate\ cancer$ 

• Iodine-125 seed implant during the 12 months prior to death

No Yes\*

\* If yes — contact the Radiation Safety Officer/Physicist at the treating institution for provision of required information to the crematorium.

	Are you aware of anything else that could render cremation unsafe?
	No
	Yes Give details
Certification of medical	I certify that the information set out above is true and correct and that I have not omitted any relevant information.
practitioner	Signature
	Date / /20

[Form 7 inserted: Gazette 29 Jun 2012 p. 2945-9; amended: Gazette 25 Feb 2014 p. 497-8; 21 Apr 2015 p. 1424; 9 Feb 2016 p. 371; 7 Mar 2017 p. 1525.]

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#### **CORONER'S CERTIFICATE**

I am informed that app the deceased person whose pa			e in regard to
	Diago of dooth	-	
Date of death  It has been reported that	at the cause of death wa		
(secondary)			
	nion the cause of death render necessary any f	was as stated. I cons urther examination of	ider that no
Dated at	this	day of	20
		Coroner	

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#### PERMIT TO CREMATE

	No
I,	, a medical
referee appointed under section 8 of the <i>Cremation Act 1929</i> , ac powers and duties vested in me under the said Act and having respectively.	0 1
from, ofthe remains of: —	, for a permit to cremate
Name of deceased	
who died at	(place of death)
on	
This permit shall not be valid until 24 hours have elapsed of the deceased person to whom the permit refers.	d from the time of death
Dated this day of	, 20
	ical Referee.
Med	ical Referee.

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#### NOTICE OF REFUSAL OF APPLICATION TO CREMATE

То	, of
	I hereby give you notice that the application made by you for a permit to cremate
the ren	nains of (name of deceased),
	(place of death)
	Medical Referee.
	[Form 10 amended: Gazette 29 Jun 1984 p. 1781; 30 Dec 2004 p. 6933; 10 Jan 2017 p. 249.]

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# REGISTER OF CREMATIONS

			Place of last abode			Name of Minister or		Method of As		1. If given
No	Name of Person Cremated	1. Age 2. Sex	2. Place where death occurred 3. Date when death occurred	Date Cremated	Permit No.	other person officiating at ceremony	Under- taker's Name	Columbarium     Niche     No.	Scattered Garden plot, interred, etc.	to relatives, to whom given 2. Date

#### Western Australia

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# CERTIFICATE OF CREMATION

Regulation 20

To the Chief Health Officer and the	Registrar General:	
I,	(name), of	(address)
in the State of Western Australia, bei		
	. (licensee), the lice	ensee of the
Crematorium, (p	lace) do hereby ce	rtify that the body of
(name of person cremated), late of		
(address of person cremated), who di		
was, in pursuance of Permit No		
(medical referee) to		
cremated in the said crematorium on		
under and in accordance with the pro		
under und in decordance with the pre-		
		Signature.
Date		
[Form 12 amended: Go p. 249.]	azette 29 Jun 198	34 p. 1781; 10 Jan 2017

# CERTIFICATE OF MEDICAL PRACTITIONER WHO HAS CONDUCTED A POST MORTEM EXAMINATION

(Regulation 20A)

I,	legally qualified medical
	tion is about to be made for a permit to cremate
the body of (name)	, late of
	,
	hereby certify that on
(date), at (1	place),
I made a post mortem examination of all	the vital organs of the deceased, and I am of
	on that the death of the deceased resulted from
natural causes, as follows: —	
	a.
	Signature
	Address
	Qualifications
Date	
No person who knows that under the terr	ms of any policy of life assurance, will.

No person who knows that under the terms of any policy of life assurance, will, settlement, or statute or otherwise howsoever he is entitled or will become entitled by reason or in consequence of the death of another person to any real or personal property shall give or sign any certificate concerning the death of such other person for any of the purposes of this Act.

[Form 13 inserted: Gazette 17 Dec 1954 p. 2252.]

# Schedule 2 — Fees

[r. 4(1), 6(1) and 12]

[Heading inserted: Gazette 2 Jul 2019 p. 2645.]

1.	For a licence to use and conduct a crematorium	\$15.00	
2.	For a certificate of the Chief Health Officer to validate and give effect to a licence (including inspections) \$5.00		
3.	For a permit to cremate —		
	(a) given between 9 am and 5 pm Monday to Friday, or between 9 am and noon Saturday, excluding public holidays	\$ <del>69.30</del> 72.	
	(b) given at any other time	\$ <del>114.40</del> <u>1</u> <u>18.80</u>	

[Schedule 2 inserted: Gazette 2 Jul 2019 p. 2645-6; amended: <u>SL 2021/46 r. 4.</u>]

# **Notes**

-This is a compilation of the Cremation Regulations-1954 and includes the amendments made by the other written laws referred to in the following table. The table also contains. For provisions that have come into operation, and for information about any reprint.reprints, see the compilation table.

# **Compilation table**

Citation	Gazettal Publi shed	Commencement
Cremation Regulations 1954	20 Aug 1954 p. 1441-9	6 Sep 1954 (see r. 2)
Untitled regulations	17 Dec 1954 p. 2252	17 Dec 1954
Reprint of the <i>Cremation Regulations</i> (includes amendments listed above)	1954 in Gazette	15 Sep 1959 p. 2339-50
Decimal Currency Act 1965 assented to	21 Dec 1965	Act other than s. 4-9: 21 Dec 1965 (see s. 2(1)); s. 4-9: 14 Feb 1966 (see s. 2(2))
Untitled regulations	16 Nov 1973 p. 4220	16 Nov 1973
Untitled regulations	28 May 1976 p. 1579	28 May 1976
Untitled regulations	24 Feb 1978 p. 560-1	24 Feb 1978
Health Legislation Amendment Regulations 1984 r. 4	29 Jun 1984 p. 1780-4	1 Jul 1984 (see r. 2)
Cremation Amendment Regulations 1984 <sup>43</sup>	28 Dec 1984 p. 4206	28 Dec 1984
Cremation Amendment Regulations 1994	27 May 1994 p. 2209	27 May 1994
Cremation Amendment Regulations 1996	2 Apr 1996 p. 1579-80	2 Apr 1996
Miscellaneous Amendments Regulations 1997 r. 2	6 Jan 1998 p. 33	6 Jan 1998
Cremation Amendment Regulations 2000	30 Jun 2000 p. 3406	1 Jul 2000 (see r. 2)

Reprint of the Cremation Regulations 1954 as at 1 Dec 2000 (includes amendments listed above)

Citation	Gazettal Publi shed	Commencement	
Cremation Amendment Regulations 2002	24 Sep 2002 p. 4766-8	24 Sep 2002- <sup>5</sup> 4	
Cremation Amendment Regulations 2004	30 Dec 2004 p. 6933	1 Jan 2005 (see r. 2 and <i>Gazette</i> 31 Dec 2004 p. 7130)	
Cremation Amendment Regulations 2008	4 Apr 2008 p. 1299-304	1 Jul 2008 (see r. 2)	
<b>Reprint 3: The </b> <i>Cremation Regulations 1954</i> as at 1 Aug 2008 (includes amendments listed above)			
Cremation Amendment Regulations 2010	13 Apr 2010 p. 1373	r. 1 and 2: 13 Apr 2010 (see r. 2(a)); Regulations other than r. 1 and 2: 25 May 2010 (see r. 2(b))	
Cremation Amendment Regulations 2012	29 Jun 2012 p. 2944-9	r. 1 and 2: 29 Jun 2012 (see r. 2(a)); Regulations other than r. 1 and 2: 30 Jun 2012 (see r. 2(b))	
Cremation Amendment Regulations 2013	8 Feb 2013 p. 865-6	r. 1 and 2: 8 Feb 2013 (see r. 2(a)); Regulations other than r. 1 and 2: 9 Feb 2013 (see r. 2(b))	
Cremation Amendment Regulations (No. 2) 2013	9 Apr 2013 p. 1521	r. 1 and 2: 9 Apr 2013 (see r. 2(a)); Regulations other than r. 1 and 2: 10 Apr 2013 (see r. 2(b))	
Cremation Amendment Regulations 2014	25 Feb 2014 p. 497-8	r. 1 and 2: 25 Feb 2014 (see r. 2(a)); Regulations other than r. 1 and 2: 26 Feb 2014 (see r. 2(b))	
Reprint 4: The <i>Cremation Regulations 1954</i> as at 5 Dec 2014 (includes amendments listed above)			
Cremation Amendment Regulations 2015	21 Apr 2015 p. 1424	r. 1 and 2: 21 Apr 2015 (see r. 2(a)); Regulations other than r. 1 and 2: 22 Apr 2015 (see r. 2(b))	
Cremation Amendment Regulations 2016	9 Feb 2016 p. 371-2	r. 1 and 2: 9 Feb 2016 (see r. 2(a)); Regulations other than r. 1 and 2: 10 Feb 2016 (see r. 2(b))	

Citation	Gazettal Publi shed	Commencement
Health Regulations Amendment (Public Health) Regulations 2016 Pt. 3	10 Jan 2017 p. 237-308	24 Jan 2017 (see r. 2(b) and <i>Gazette</i> 10 Jan 2017 p. 165)
Cremation Amendment Regulations 2017	7 Mar 2017 p. 1525-6	r. 1 and 2: 7 Mar 2017 (see r. 2(a)); Regulations other than r. 1 and 2: 8 Mar 2017 (see r. 2(b))
Health Regulations Amendment (Public Health Consequential Amendments) Regulations 2017 Pt. 3	19 Sep 2017 p. 4883-5	20 Sep 2017 (see r. 2(b) and <i>Gazette</i> 19 Sep 2017 p. 4880)
Cremation Amendment Regulations 2018	6 Apr 2018 p. 1211-12	r. 1 and 2: 6 Apr 2018 (see r. 2(a)); Regulations other than r. 1 and 2: 7 Apr 2018 (see r. 2(b))
Cremation Amendment Regulations 2019	2 Jul 2019 p. 2645-7	r. 1 and 2: 2 Jul 2019 (see r. 2(a)); Regulations other than r. 1 and 2: 3 Jul 2019 (see r. 2(b))
<u>Cremation Amendment</u> <u>Regulations 2021</u>	SL 2021/46 7 May 2021	r. 1 and 2: 7 May 2021 (see r. 2(a)); Regulations other than r. 1 and 2: 8 May 2021 (see r. 2(b))

#### **Other notes**

- Repealed by the *Cemeteries Act 1986*.
- Repealed by the Associations Incorporation Act 1987.
- The *Miscellaneous Regulations (Validation) Act 1985* applied to these regulations. It deems the regulations not to have ceased to have effect as a result of the failure to comply with section 42(1) of the *Interpretation Act 1984*, subject to their being laid before the Legislative Assembly. The *Interpretation Act 1984* s. 42(2) then applied as if the words "or if any regulations are not laid before both Houses of Parliament in accordance with subsection (1)" had been omitted.
- The commencement date referred to in r. 2 was before the date of gazettal.