



Port Curtis Coral Coast Trust Limited



Port Curtis Coral
Coast Trust Ltd
2 Marina Drive
BURNETT HEADS Q 4670



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BUNDABERG Q 4670

FUNERAL ASSISTANCE POLICY FOR THE PCCC NATIVE TITLE CLAIM GROUP

- PCCC Ltd Funeral Assistance Fund is capped at a total of \$2,000.00 per grant per Family.
- Eligibility for assistance must first be proven, by Representatives (2 Elders) from the relevant clan group.
- Where the deceased have their own Funeral Fund or Super Fund their family members will not be eligible for assistance.
- Members within the four PCCC Tribes (Byellee, Gurang, Gooreng Gooreng & Taribelang Peoples) will only be considered on a case by case basis.
- Those who have passed must belong to one of the four Traditional Owner Groups or be their partner and children who have cultural, or traditional ties by marriage.
- Payment must be made to service providers/suppliers and not to families or individuals. Eg; Suppliers such as, funeral parlour, catering, hire of venues, etc.....
- *No Money will be paid to family members, only direct to the suppliers.

Applicant Details: (please complete details)

Title (Mr/Mrs/Ms/Miss):		Surname:			
First Name(s):		Gender (M/F):		Marital Status:	
Home Address:					
City/Suburb:		State:		Postcode:	
Contact Telephone:	(Work)	(Home):		(Mobile):	
Mailing Address (if different from home):					
City/Suburb:		State:		Postcode:	
Date of Birth:					

Applicant Declaration: It is hereby confirmed that I, the applicant am:

1. Recognised and accepted as a traditional owner of the [please indicate by <input type="checkbox"/>]	<input type="checkbox"/> Gooreng Gooreng <input type="checkbox"/> Gurang <input type="checkbox"/> Taribelang <input type="checkbox"/> Byellee
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2. PCCC Apical Ancestor [please identify Apical Ancestor]
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..... Name of Applicant Signature of Applicant/...../..... Date
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Please tick the following box if you wish for your funeral notice to be non-disclosed:

Elders Declaration: It is hereby confirmed that the Applicant:

	Initial
1. Is of Aboriginal Descent.	
2. Recognised and accepted as a traditional owner of the _____ (insert name of Tribal group) of the Port Curtis Coral Coast native title region which is the applicant's Traditional Area.	
3. The representatives for the Authorisation purpose are 2 Elders of the named tribe on the application.	

Elder No 1: Name of Elder Signature of Elder/...../..... Date
Contact Ph. No:		
Elder No 2: Name of Elder Signature of Elder/...../..... Date
Contact Ph. No:		

Continue over the page....

Details of Deceased:	
Name of deceased:	
Date of death:	
Name of funeral parlor:	
Date of service:	

PAYMENT TOWARDS: *Please tick the following*	
Funeral Home	<input type="checkbox"/>
Wake	<input type="checkbox"/>
Other *Please specify below*	<input type="checkbox"/>

CHECKLIST	TICK IF COMPLETE
1. Application completed in full	<input type="checkbox"/>
2. Application declaration/Name of Tribal Group completed	<input type="checkbox"/>
3. Provide details of deceased	<input type="checkbox"/>
4. Specify what the payment will be going towards	<input type="checkbox"/>
5. Invoice attached to this application	<input type="checkbox"/>
6. Elders Declaration signed by two Elders of the named tribe on the application.	<input type="checkbox"/>

Please Note:

- If the application is not completed, your application will not progress.
- Once the application form has been completed in full and invoice has been attached, please sign and date the declaration below.
- **Privacy Notice:** In using this form, you are providing personal information such as name and contact details. This information will be used for the purpose of processing your application. Your personal information will be accessed by persons who have been authorised to do so. Your personal information is handled in accordance with the Information Privacy Act 2009.

OFFICE USE ONLY

Amount	\$	Date Paid:/...../.....
Paid To:		