THE CORPORATION OF THE CITY OF COURTENAY

BYLAW NO. 2614

A bylaw to amend Cemetery Management Bylaw No. 2569, 2009

The Council of the Corporation of the City of Courtenay in open meeting assembled, enacts as follows:

This bylaw may be cited for all purposes as the "Cemetery Management Amendment Bylaw No. 2614, 2010".

- 1. That "Cemetery Management Bylaw No. 2569, 2009" be amended as follows:
 - (a) That Section 1 be amended by adding the following definitions:

"Scattering" means the non-recoverable dispersal of cremated remains over a body of land or water within a defined area of a cemetery.

"Scattering Garden" means a designated area where cremated remains that have been removed from their container, can be mixed with or placed on top of the soil or ground cover.

- (b) That Section 9 be deleted and substituted with the following:
 - 9. The size of grave spaces shall be:

Adult: 1.219

1.219m x 2.743m (4' x 9')

Infant:

.6096m x 2.743m (2' x 4')

Cremated Remains:

.6705m x 1.615m (2.2' x 5.3')

K – Section:

.6096m x .6096m (2' x 2')

- (c) That Section 19 be amended by adding the following subsections:
 - 19(8) Scattering of cremated remains is permanent and non-recoverable and is permitted only in the designated locations and under the supervision of the Caretaker.
 - 19(9) The interment of cremated remains is to be completed within 90 days of all fees being paid.
- (d) That Section 33, Subsection 4 be amended by adding the following:

30.48cm (12") in width by 55.88cm (22") in length for an infant grave.

- (e) That Section 33 be amended by adding the following subsections:
 - Porcelain memorial portraits are permitted on niche fronts provided they are supplied and installed by the City and conform to the approved design and specifications as established by the City. The photo must be of the person(s) who are named on the niche and must be approved by City. The photo must be in a traditional portrait style in black and white or colour. One memorial photo sized either 5.7cm x 7cm or 6.7cm x 8.6cm is allowed per niche. Two memorial photos each sized 4cm x 6cm is allowed per niche. The placement of the memorial photo(s) shall placed at the top of the niche front above the bronze plaque centred accordingly.
 - 33(9) Scattering board memorials shall be engraved on a 3" x 4" bronze plaque supplied and installed by the City to conform to the approved design and specifications of the applicable section of the Cemetery as established by the City.
- (f) That Section 34 be deleted in its entirety and replaced with the following:
 - 34. No grave, grave space, niche space or memorial garden shall be defined by a fence, railing, coping, curbing, hedge except a memorial marker as set out in Section 33.
- (g) That Section 37, Subsection 5 be amended to read as follows:
 - 37(5) One potted plant to a maximum diameter of 6" may be placed on a grave space for one week at Easter, Mother's Day, Father's Day, Remembrance Day and Christmas.
- (h) That Schedule "B" be hereby repealed and substituted therefore by the Schedule "B" attached hereto and forming part of this bylaw.
- (i) That Schedule "C" 'Authorization to Scatter Cremated Human Remains' be added, as attached hereto and forming part of this bylaw.
- 2. This bylaw will come into force upon final adoption.

Read a first time this 6th day of April, 2010

Read a second time this 6th day of April, 2010

Read a third time this 6th day of April, 2010

Finally passed and adopted this 12th day of April, 2010

Mayor

Manager of Corporate Administration

830 Cliffe Avenue Courtenay BC, V9N 2J7 250-334-4441 250-334-4241 Fax

CITY OF COURTENAY CEMETERY MANAGEMENT AMENDMENT BYLAW NO. 2614 SCHEDULE 'B' RESIDENT FEES (\$)

| Ground Burial | Grave Space | Care Fund Contribution | Preparation & Placement | TOTAL | Grave Space Only |
|-----------------------------|----------------|---------------------------|----------------------------|---------|---------------------|
| Adult Lot | 474.00 | 158.00 | 1215.00 | 1847.00 | 632.00 |
| Infant Lot or Stillborn Lot | 132.00 | 44.00 | 607.00 | 783.00 | 176.00 |
| Cremation Lot | 174.75 | 58.25 | 285.00 | 518.00 | 233.00 |
| Scattering | | | 120.00 | 120.00 | |
| Columbarium | Niche Space | Care Fund Contribution | Preparation & Placement | TOTAL | Niche Space Only |
| Double Niche 1st Interment | 900.00 | 100.00 | 100.00 | 1100.00 | 1000.00 |
| Double Niche 2nd Interment | | | 100.00 | 100.00 | |
| Bottom Row Side B | 720.00 | 80.00 | 100.00 | 900.00 | 800.00 |

NON-RESIDENT FEES (\$)

| Ground Burial | Grave Space | Care Fund Contribution | Preparation & Placement | TOTAL | Grave Space Only |
|-----------------------------|----------------|---------------------------|----------------------------|---------|---------------------|
| Adult Lot | 780.00 | 260.00 | 1215.00 | 2255.00 | 1040.00 |
| Infant Lot or Stillborn Lot | 246.00 | 82.00 | 607.00 | 935.00 | 328.00 |
| Cremation Lot | 262.50 | 87.50 | 285.00 | 635.00 | 350.00 |
| Scattering | | | 220.00 | 220.00 | |
| Columbarium | Niche Space | Care Fund Contribution | Preparation & Placement | TOTAL | Niche Space Only |
| Double Niche 1st Interment | 1620.00 | 180.00 | 100.00 | 1900.00 | 1800.00 |
| Double Niche 2nd Interment | | | 100.00 | 100.00 | |
| Bottom Row Side B | 1440.00 | 160.00 | 100.00 | 1700.00 | 1600.00 |

FEES FOR SERVICES & PRODUCTS (\$)

| Maintenance | | |
|-------------|---|-------------|
| Setting Fee | Care Fund | TOTAL |
| 140.00 | 10.00 | 150.00 |
| 40.00 | 10.00 | 50.00 |
| | Maintenance | |
| Memorial | Care Fund | TOTAL |
| 440.00 | 10.00 | 450.00 |
| 115.00 | 10.00 | 125.00 |
| | | |
| 190.00 | 10.00 | 200.00 |
| | 140.00 40.00 Memorial 440.00 115.00 | Setting Fee |

Administration Fees

| Late Arrivals at Cemetery (to be charged to funeral home for | |
|--|-------|
| each half hour, or part thereof, after scheduled arrival time) | 50.00 |
| Licence Transfer Fee | 20.00 |

Monday-Friday after 3:30 p.m.

Add \$250.00 to the Preparation and Placement Fee

Saturday. Sunday and Statutory Holidays

| Full Burial | Preparation and Placement Fee \$1,822.00 |
|---------------|--|
| Infant Burial | Preparation and Placement Fee \$945.00 |
| Cremation | Preparation and Placement Fee \$427.00 |

Exhumation Grave Lot: to be conducted by contract and will not be done by the City of Courtenay staff, unless required by an enactment. Actual contract costs to be paid by person(s) requesting exhumation

| Exhumation Cremation Lot | 425.00 |
|--------------------------|--------|
| Exhumation Niche Space | 125.00 |
| Tent Set-up | 125.00 |

Other Fees:

Cemetery products not listed Cost + 50%

All fees are subject to applicable taxes.

□map □cal □fax

CITY OF COURTENAY Corporate Services/Cemetery Division Telephone: (250)334-4441 Fax: (250) 334-4241

Schedule C

830 Cliffe Avenue Courtenay, BC, V9N 2J7 Email: info@courtenay.ca

AUTHORIZATION TO SCATTER CREMATED HUMAN REMAINS

| Date: (of booking) | | , | | |
|---|--|---|---|--|
| DECEASED INFORMATION | , | | | |
| Name: | | | Age: | |
| Address: | | | Sex: | |
| Date of Birth: | Place of Birth: | Date o | of Death: | |
| Place of Death: | | | | |
| Funeral Home: | | Funeral Director: | | |
| Scattering to be performed by family | ☐ YES | □ NO | | |
| | ☐ Bronze Plaqu | e for Memorial Book | | |
| Date for Scattering: | the_ | day of | | |
| at a.m./p.m. | | | | |
| I acknowledge that scattering of cremated remain scattering area. I further acknowledge that community authorization acknowledges that the informative use, memorialization and visitation of the Courter regulations of the City of Courtenay Cemetery as Under "Order of Priority" provisions of the Courter representative of the above named deceased. Further authorize the interment of the above named deceased with this authorization. I agree to indemnify an claims resulting from this authorization. | ation provided and services nay Cemetery is subject in they may be in effect at the remation, Interment and I arther I certify that I have a seed under the terms and co | d human remains may occur as s and products selected by me a every way to the Cemetery Ma e time of scattering or as may be funeral Services Act of BC, I the full legal right to authorize conditions outlined herein and ac | re accurately reflected herein and that the magement Bylaw No. 2569, and rules and amended time-to-time thereafter. certify that I am the legally authorized use of the above identified lot, do hereby except all responsibility for costs associated | |
| Signature of Authorized Person | Printed Name | | Relationship to Deceased | |
| Address: | lress: | | City/Prov: | |
| Phone: | | | | |
| Scatter | ing Fee (CEMOP) | \$ | Care Fund Portion | |
| Bronze | Plaque (PLAQ) | \$ | \$10.00 | |
| GST | | \$ | | |
| | TOTAL OWING | \$ | | |