



Australian Government

Department of Veterans' Affairs

# Application and Guidelines for a Military Memorial of National Significance

## The Act

The application is made under the *Military Memorials of National Significance Act 2008*. The Act can be accessed at [www.comlaw.gov.au](http://www.comlaw.gov.au)

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## Completing the application

The application must be made by, or on behalf of, a State, Northern Territory or local government authority that owns or manages the memorial.

If there is not enough space to complete an answer, please attach a separate sheet.

**All applications must be signed by two representatives of the applicant organisation.**

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## Privacy notice

Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by the Department of Veterans' Affairs (DVA) for the delivery of government programs for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

[Read more: How DVA manages personal information](#)

**PART A****Applicant organisation details**

**1 Full legal name of applicant organisation**

**2 Trading or business name**  
(if applicable)

**3 Legal identity**  
(e.g. Local government authority)

**4 Any relevant licence, registration or provider number**

**5 Australian Company Number (ACN) or other entity identifier(s)**

**6 Australian Business Number (ABN)**

**7 Registered office** (physical address)   
  
  
 POSTCODE

**8 Registered office** (postal address)   
  
  
 POSTCODE

**9 Organisation telephone number**  [ ]

**10 Organisation fax number**  [ ]

**11 Organisation e-mail address**

**12 Organisation website address**

**13 Organisation CEO/Principal**

Name	<input type="text"/>
Position	<input type="text"/>
Telephone number	[ <input type="text"/> ]
Mobile number	<input type="text"/>
Fax number	[ <input type="text"/> ]
E-mail address	<input type="text"/>

**14 Contact person for this application**

Name	<input type="text"/>
Position	<input type="text"/>
Telephone number	[ <input type="text"/> ]
Mobile number	<input type="text"/>
Fax number	[ <input type="text"/> ]
E-mail address	<input type="text"/>

**15 Additional contact person for this application**

Name	<input type="text"/>
Position	<input type="text"/>
Telephone number	[ <input type="text"/> ]
Mobile number	<input type="text"/>
Fax number	[ <input type="text"/> ]
E-mail address	<input type="text"/>

<b>PART B</b>	<b>Memorial details</b>
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**16 Full title of the memorial**

<b>17 Full address of the memorial</b>	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

POSTCODE



**18 Describe the area surrounding the memorial precincts** (e.g. located in public parkland, in a dedicated memorials precinct, nearby buildings or structures and access details)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

**19 Full details of the memorial design and structure**  
(including dimensions, materials, designer if known, inscriptions)


Number of images of memorial



Please provide images of the memorial from all angles and its surrounds/setting

Number of images of inscriptions



Please provide images of all inscriptions on the memorial and its surrounds

**20 Describe the symbolism of the memorial**


**21 Describe how the memorial commemorates Australia's military involvement in a significant aspect of Australia's wartime history**


**22 Does the memorial have heritage listing?**

No

Yes

▶ Please give details of Act or Regulations under which listed, date of listing and basis of listing


**23 Is it recorded on any register or website?**

No

Yes

▶ Please give details


**Memorial's history**


**24 When was the memorial established** (completed or dedicated)?

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**25 Why was the memorial established?**


**26 Who established the memorial?**


**27 Has the memorial changed from the original design?** No  Yes  ▶ Please give details of nature of changes and when these took place and images of original memorial if available


Number of images of original memorial  ▶  Please provide images if available

**28 Has the memorial undergone significant restoration or refurbishment?** No  Yes  ▶ Please give details


**29 Which war/s and conflict/s are commemorated on the memorial?**


**30 Who is commemorated?**  
(e.g. individuals, Services, battles or units named)


**Memorial's purpose**

**31 Is the commemoration of Australia's wartime history its sole purpose?** No  Yes

▼  
What other purpose does the memorial serve?


**32 What ceremony/ceremonies are held at the memorial?**  
(provide details of the events commemorated, dates held and who attends)


**33 Who conducts the ceremony/ceremonies?**  
(provide details of the organisation(s) responsible)


**34 What role does the memorial have in community commemorations?**


**35 Are flags flown at the memorial?**  
(Commonwealth Flag protocols are available at [www.itsanhonour.gov.au](http://www.itsanhonour.gov.au))

No  Yes  ▶ Please describe the flags flown


Days on which the flags are flown


Are Commonwealth Flag protocols observed?

No  Yes

▼  
Please provide reasons


**36 Is the memorial located on public land within a State or the Northern Territory?**

No  Yes

▼  
Please give details


**37 Is the memorial publicly accessible at all times?**

No  Yes

▼  
Please give details


**38 Are there any entry fees associated with access to the memorial?**

No  Yes  ▶ Please give details


**Memorial's ownership and management**

**39 Who owns the memorial?**


**40 Who manages the memorial?**


**41 Which organisation undertakes maintenance of the memorial?**


**42 How often is maintenance undertaken?**


**43 What annual budget is set for maintenance and/or refurbishment of the memorial?**

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**44 What planning and other regulatory requirements apply to the memorial?**


Does the memorial comply fully with all these?

No  Yes

▼  
Please give details


**45 Is the memorial a completed and functioning memorial?**

(Approved plans/design for the memorial must have been fully implemented and the memorial must be in use.)

No  Yes

▼  
Please give details


**46 Describe present condition of the memorial**

(e.g. does it require repair or refurbishment?)




Please attach report from a qualified person on memorial's condition, including any works required

**PART C**

**Other information**

**47 Is the memorial associated with any commercial function which conflicts with its commemorative purpose?**

(e.g. shop/retail, heritage area, recreational area)

No  Yes  ▶ Please give details


**48 Are there any commercial enterprises in close proximity to the memorial?**

No  Yes  ▶ Where are they located?


Distance from memorial?

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**49 Please provide a list of all organisations with an interest (commemorative, management, maintenance, financial or otherwise) in this memorial.**

Name of organisation	Contact person	Contact phone number
		[   ]
		[   ]
		[   ]
		[   ]
		[   ]
		[   ]
		[   ]
		[   ]

**50 Are all organisations associated with this memorial in support of this application?**

No  Yes   
▶ Please give details




## PART D

## Application checklist

**Before sending in your application, please ensure you have answered all questions and attached documents.**

- Location map for the memorial
- Images of the memorial and its surrounds
- Images of all inscriptions on the memorial and its surrounds
- Images of original memorial if design has changed
- A report on the condition of the memorial
- Proof of ownership of the memorial (if no Certificate of Title available, a statement from trustee or local authority will suffice)
- Other - any additional information you may wish to provide - please specify


## PART E

## Certification

**All applications must be signed by two representatives of the applicant organisation**

We, the undersigned, hereby certify that all details provided in this application are true and correct to the best of our knowledge.

**1**

Printed name (in full)

Position in organisation

**SIGNATURE**

Date

**2**

Printed name (in full)

Position in organisation

**SIGNATURE**

Date

**Please post your completed and signed application and attachments to:**

Director  
Office of Australian War Graves  
Department of Veterans' Affairs  
GPO Box 9998  
Brisbane QLD 4001

**or e-mail your completed, signed and scanned application and attachments to:**

[wargraves@dva.gov.au](mailto:wargraves@dva.gov.au)