



CHURCH OF THE SACRED HEART

111 TANK ROAD, SINGAPORE 238069

TEL: +65 67379285 FAX: +65 67378502

EMAIL: columbarium@sacredheartchurch.sg

NICHE UPDATE FORM

Niche No: _____ Block: _____

Level: _____ Unit No: _____

(A) Particulars of Applicant	
Name: (Please underline surname)	
Address:	
Home Tel No:	Handphone No:
E-mail Address:	

Signature of Applicant

Date:

Note:

Kindly attach a copy of the Niche Application Form for verification purpose.



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(please provide **at least ONE** or more alternative contact person other than the Applicant)

(i) First Contact Person	
Name: (Please underline surname)	
Address:	
Home Tel No:	Handphone No:
E-mail Address:	
(ii) Second Contact Person	
Name: (Please underline surname)	
Address:	
Home Tel No:	Handphone No:
E-mail Address:	



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Niche No: _____ Block: _____

Level: _____ Unit No: _____

(B) Particulars of Beneficiaries <i>(persons whose ashes will be interred in the Niche)</i>		
Beneficiary 1		
Name: (Please underline surname)		
Passport/NRIC No:		
Date of Birth:	Date of Death (if applicable):	Date of Internment:
Gender: Male / Female	Catholic: Yes / No	

Beneficiary 2		
Name: (Please underline surname)		
Passport/NRIC No:		
Date of Birth:	Date of Death (if applicable):	Date of Internment:
Gender: Male / Female	Catholic: Yes / No	