

檔案編號  
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**墳場及火葬場組**

**CEMETERIES & CREMATORIA SECTION**

**申請火葬證明書**

**APPLICATION FOR CERTIFICATE OF CREMATION**

**(甲部) 申請人資料 (Section A) Particulars of Applicant**

中文姓名： \_\_\_\_\_ 中文電碼： \_\_\_\_\_  
Name in Chinese \_\_\_\_\_ Chinese Commercial Code \_\_\_\_\_

英文姓名： \_\_\_\_\_  
Name in English \_\_\_\_\_

性別：  男  女 出生日期： \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Sex Male Female Date of Birth 日 DD 月 MM 年 YYYY

香港身分證／護照\*號碼： \_\_\_\_\_ 電話號碼： \_\_\_\_\_  
HKID Card/Passport\* No. \_\_\_\_\_ Tel. No. \_\_\_\_\_

聯絡地址： \_\_\_\_\_  
Correspondence Address \_\_\_\_\_  
 香港(HK)  九龍(KLN)  新界(NT)

**(乙部) 先人資料 (Section B) Particulars of Deceased**

中文姓名： \_\_\_\_\_ 性別：  男  女 國籍： \_\_\_\_\_  
Name in Chinese \_\_\_\_\_ Sex Male Female Nationality \_\_\_\_\_

英文姓名： \_\_\_\_\_  
Name in English \_\_\_\_\_

與申請人關係： \_\_\_\_\_  
Relationship with the Applicant : \_\_\_\_\_

火化地點 Place of Cremation : \_\_\_\_\_

火化日期 Date of Cremation : \_\_\_\_\_

**(丙部) 申請人聲明 (Section C) Declaration by Applicant**

謹此聲明，就本人所知所信，在本申請表所填報的資料，均屬確實無訛。本人明白，如填報的資料經查明失實，本申請將不獲批准，如已獲批准亦將會被撤回。

I declare that to the best of my knowledge and belief all the information contained in this application form is true and correct. I understand that no permission will be given or such permission if given will be revoked if I have made a false declaration.

日期： \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date 日 DD 月 MM 年 YYYY

\_\_\_\_\_  
申請人簽署 Signature of Applicant

## 注意事項 Notes

1. 本表格不收費用。  
No fee is charged for this form.
2. 本表格可用英文或中文填寫。  
This form can be completed in either English or Chinese.
3. 申請人必須填寫本表格的甲、乙及丙部。  
Applicant should complete Sections A, B and C of this form.
4. 丙部須由申請人親自簽署，否則本申請將被視作無效。申請人如不懂簽名，則須在高級衛生督察(墳場及火葬場)、場地經理(墳場及火葬場)或助理場地經理(墳場及火葬場)面前畫上記號。  
Section C must be signed by the applicant personally, otherwise this application will be treated as null and void. If the applicant is unable to sign the application, he/she is required to attend either before the Senior Health Inspector (C&C), Venue Manager (C&C) or Assistant Venue Manager (C&C) to make his/her mark.
5. 食物環境衛生署會利用經本表格所提供的個人資料，處理轄下墳場及火葬場服務的申請事宜。提供個人資料與否，純屬自願性質，但在資料不足的情況下，則恐怕不能處理有關的申請。  
The personal data provided by means of this form will be used by the Food and Environmental Hygiene Department for purposes relating to applications for cemeteries and crematoria services. The provision of personal data by means of this form is voluntary. However, if the applicant does not provide sufficient information, we may not be able to process the application.
6. 本表格內所提供的個人資料，可能會被轉交其他政府部門或機構，以達致上文第 5 段所載的目的。  
The personal data provided by means of this form may be disclosed to other Government Departments and Agencies in pursuance of the purposes mentioned in paragraph 5 above.
7. 根據個人資料(私隱)條例第 18 條、第 22 條及附表 1 內第 6 原則的規定，申請人有權查閱及更正他／她的個人資料。查閱的權利包括有權索取本表格內所提供的個人資料副本一份。  
The applicant has a right of access and correction with respect to personal data as provided for in accordance with Sections 18 and 22 and Principle 6 of Schedule I of the Personal Data (Privacy) Ordinance. His/her right of access includes the right to obtain a copy of his/her personal data which he /she has provided by means of this form.
8. 如對經由本表格提供個人資料一事有任何疑問，包括查閱及更正個人資料等，可向本署高級衛生督察(墳場及火葬場)提出，地址為：

港島辦事處	— 跑馬地黃泥涌道一號 J (香港墳場側)	電話：2578 9406
九龍及新界辦事處	— 紅磡暢行道 6 號地下高層	電話：2364 5405

Enquiries concerning the personal data collected by means of this form, including the making of access and corrections, should be addressed to the Senior Health Inspector (Cemeteries and Crematoria) at :

Hong Kong Office	— 1J, Wong Nai Chung Road, Happy Valley. (Next to Hong Kong Cemetery)	Tel.: 2578 9406
Kowloon & NT Office	— Upper Ground Floor, 6, Cheong Hang Road, Hung Hom.	Tel.: 2364 5405