



**POLICY ON BURIAL ASSISTANCE FOR THE
DESTITUTE**

SUMMARY

Publication Date	
Review Date	<i>February 2018</i>
Related Legislation/Applicable Section of Legislation	<ul style="list-style-type: none"> • The National Health Act, 61 of 2003. • Section 48(2) of the Health Act, 63 of 1977. • The Regulation Governing Funeral Undertakers Premises. • The Regulation defining the Scope of the Profession of Environmental Health; GN.R 698
Related Policies, Procedures, Guidelines, Standards, Frameworks	
Replaces/ Repeals (whichever is relevant, if any)	
Policy Officer (Name/Position)	<i>Ms. B. Mfunda Manager office of the Mayor</i>
Policy Officer (Phone)	<i>040 673 3095</i>
Policy Sponsor (Name/Position)	
Department Responsible	<i>(Office of the Municipal Manager)</i>
Unit responsible	<i>(SPU)</i>
Applies to	<i>Ngqushwa residents</i>
Key Words	
Status	
Council approval date	
Version	<i>(e.g. Version 1 or v.1)</i>

REVISION RECORD

Date	Version	Revision Description
08 February 2018		

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1. TITLE

POLICY ON THE BURIAL OF PAUPERS AND EXCEPTIONAL CASES
RELATING TO THE DECEASED

2. PURPOSE

Within the context and scope of the preamble above, the purpose of the Policy is to provide an institutional framework for the continuous delivery of Municipal Health Services and as a decision-making tool.

3. SCOPE

This Policy is applicable to all people who reside in the area which falls under the jurisdiction of NLM.

4. PROCEDURE DETAIL

4.1 Process: The process is as follows:-

- (i) Submission of a written application to the office of the Municipal Manager.
- (ii) Submission of necessary documents by relevant authorities and parties
- (iii) Final assessment and approval

4.2 Procedure: The procedure is as follows:

- (a) A person making an application for a pauper burial must make declaration to that effect.
- b) A certified copy of the Identity Document of the deceased, where possible, must also be submitted together with the application.
- c) A death certificate must be submitted, stating the cause of death and signed by a Medical Officer.
- d) When the burial is of an unknown or unclaimed body, a written statement by the South African Police Services must be submitted stating that there is no objection to the burial of the body.
- e) When all the necessary documents have been received, NLM will request quotes for destitute burial from three different funeral undertakers.
- f) The funeral undertaker that covers all the basic necessities for the burial of a destitute person at the most reasonable cost will be recommended.

- g) The funeral undertakers 'quote must cover of the following:
- A coffin
 - Storage costs
 - Funeral service
 - Transport for the coffin to the graveyard
- h) The maximum amount for a pauper shall not exceed R3 800.00. The local Municipality should also donate the grave.
- i) Deviation from Clause 7.2 can only be allowed in exceptional cases and must be approved by the Municipal Manager.
- j) Only quotes from funeral undertakers that have a current Certificate of Competence issued by NLM will be considered.
- k) Collection and storage of unclaimed or unknown bodies from the street by a Funeral Undertaker shall not automatically lead to the appointment of that funeral undertaker.
- l) Arrangements for land to bury the deceased shall be the responsibility of the funeral undertakers.
- m) A pauper may be buried or cremated according to the conditions determined by the council.
- n) If the body of a pauper has been cremated, the ashes shall be retained by the funeral undertaker for a period not exceeding 12 months.
- o) Ashes not claimed within the period of 12 months shall be buried in an ash grave
- p) The burial of a person who has died in a hospital or other institution shall be the responsibility of such hospital or institution.

5. ROLES AND RESPONSIBILITIES

Role	Authority
Create, evaluate, review and policy adoption	Council
<ul style="list-style-type: none">• Implement and enforce this policy• Establish and control the administration necessarily to give effect to this policy	Municipal Manager
Compliance	Office of the Municipal Manager

6. MONITORING, EVALUATION AND REVIEW

The institutional responsibility, administration and review of the policy are vested in the authority of the Municipal Manager. Implementation and monitoring of the policy shall be the responsibility of the Community Services Department.

It will be the responsibility of the Office of the Municipal Manager to consider the provisions of this policy on annual basis.

7. DEFINITIONS AND ABBREVIATIONS

Term	Meaning
Body:	The remains or portion of a deceased person
Certificate of Competence:	A document issued upon compliance with the regulations relating to funeral undertakers premises; Government Notice No.237 of 8 February 1985

Communicable disease:	A disease resulting from an infection caused by pathogenic agents or toxins generated by the infection, following the direct or indirect transmission of the agents from the source to the host.
Dead/ Deceased:	A person certified as such by a Medical Doctor.
Exceptional cases:	Where the circumstances around the burial of the deceased result in escalation of costs, such that maximum amount of R3 800.00 is exceeded.
Pauper:	A person who has died as an unknown person and whose next of kin cannot be traced.
Pauper burial:	Burial of a pauper.
Unclaimed body:	A person's corpse that has not been claimed by a competent person after a period of six months investigation for the next-of-kin.
Unknown body:	An unclaimed body whose next-of-kin cannot be traced after a period of six months.
Application form	means the form attached hereto as annexure "A".

8. SUPPORTING DOCUMENTS

NONE

9. REFERENCES

NONE

10. APPENDIX

Annexure "A".

ANNEXURE A

APPLICATION FOR A DESTITUTE BURIAL

1. PARTICULARS OF APPLICANT

I.....
.....

(Full Names and Surname)

Position

.....
.....

Physical address

.....
.....

.....
.....

Code.....

Postal

Address:.....
.....

Code.....

Herby apply for the burial of the following deceased whom I identify as:

2. PARTICULARS OF DECEASED PERSON

ID Number.....

Full Nam sans Surname

.....
.....

Home Address (if known)

Next of
skin.....

.....

BRIEF DESCRIPTION OF CAUSE OF DEATH

(To be certified by a Medical Doctor where possible)

.....
.....
.....

Signed On.....Day
of.....Year.....

If the person died in Hospital, this form must be completed by duly authorised doctor or nurse and certified by a police officer where the deceased was found out of hospital premises.

Full Names of the person certifying the death

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