NOTICE OF INTERMENT FORM WEST HALTON AND COLEBY PARISH COUNCIL

Application for interment should be made to the Clerk West Halton and Coleby Parish Council at least THREE working days prior to the proposed interment (exclusive of weekends and statutory holidays).

ALL SECTION must be completed in FULL and block capital letters; please be aware that the interment may be delayed should forms submitted to the Parish Council, which are not fully completed.

SECTION 1 - NAME & ADDRESS OF FUNERAL DIRECTORS/FUNERAL ARRANGER/AGENT

FUNERAL DIRECTOR*☐ FUNERAL ARRANGER*☐ AGENT*☐ FAMILY*☐ *Please tick as appropriate

Full Name----------

Address: .....

Representative's Signature:_____

PRIVATE SERVICE: NO INFORMATION TO BE RELEASED ☐

SECTION 2 - DETAILS OF DECEASED

FULL Name of Deceased ----------

DATE of DEATH ----------

OCCUPATION: .....

MALE / FEMALE* AGE:_ _ SINGLE/ MARRIED /WIDOWED/OTHER*

PLACE of DEATH including Post Code----------

USUAL RESIDENCE including Post Code: .....

SECTION 3 - INTERMENT DETAILS including Funeral Service detail where applicable:

DAY:_____DATE: ---------- TIME:_____am/pm*

☐ CHAPEL* ☐ DIRECT TO GRAVE

RELIGION:_____OFFICIANTS NAME:_____

SECTION 4 - GRAVE OWNERSHIP:

Full name of holder of Exclusive Right of Burial ----------

Address: .....

Deed number (if known): -

SECTION 5 - GRAVE DETAILS:

CEMETERY SECTION:_____ GRAVE NUMBER:_____

Please tick ALL sections which apply.

☐ Pre-PURCHASED GRAVE ☐ NEW GRAVE ☐ RE-OPEN GRAVE ☐ FULL COFFIN INTERMENT ☐ INTERMENT OF CREMATED REMAINS

☐ SINGLE GRAVE ☐ DOUBLE GRAVE ☐ CREMATED REMAINS GRAVE

All new graves other than cremated remains, are prepared to a depth of 6'6" (allowing for 2 coffin burials) unless otherwise stated.

However, further interments are not fully guaranteed - only where conditions allow.

Please note that traditional graves are only permissible in the cemetery.

FULL COFFIN DETAILS must be given on the interment form at the time of submission.

	Length (inches)	Width (inches)	Type of Handles
☐ COFFIN			
☐ CASKET			
☐ CREMATED REMAINS CASKET			
☐ BIODEGRADEABLE ASH BOX			

IMPORTANT; if the measurements given are incorrect, the coffin may not fit the grave.

SECTION 6 -APPLICANTS DETAILS:

I hereby authorise and request that the grave identified in Section 4, is prepared for burial and that I:

☐ Hold the exclusive right of burial ☐ I am the person entitled to authorise the burial of the deceased as named in section 2.

Full Name ----------

Address: .....

Town: -

Post Code: -

Telephone number(s), Landline:_____ Mobile:_____

Relationship to the deceased: -

Signature:_____

By signing, I hereby undertake to indemnify West Halton and Coleby Parish Council in respect of any claims or demands that may be made at any time after, in connection with, or arising out of such interment.

Signed:_____ Date: -

Witnessed by----------

Print Name:- -

SECTION 7 - Transfer of Ownership

If the owner of the exclusive burial right is deceased, it is advised that the person giving notice of interment, or the family of the deceased, may wish to consider transferring ownership if further interments are intended to take place and, in all cases, for altering or placing of a headstone.

Please contact West Halton and Coleby Parish Council Clerk should you wish to arrange a transfer of deed ownership.

SECTION 8 - Special Instructions

Please notify the Bereavement Services office of any special instructions in relation to this funeral service: