

INTERMENT FORM

ST SAVIOURS CEMETERY

To be remitted to the Clerk to the Hungerford Town Council with the appropriate fee (no later than TWO CLEAR DAYS BEFORE THE PRE-ARRANGED TIME FOR THE BURIAL).

To: HUNGERFORD TOWN COUNCIL
The Library
Church Street
Hungerford
Berkshire, RG17 0JG
Tel: 01488 686195

BURIAL

INTERMENT OF ASHES AFTER CREMATION

The following particulars of the deceased must be provided:

- 1. a) Full forename(s) and surname.....
- b) Male/ Female
- c) Age last birthday.....
- d) If under 18 years, name and address of parents:.....
.....
- e) Usual place of residence.....
- f) Date of death.....
- g) Place in which death occurred.....
.....

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- 2. a) Day and Date of interment.....Time
 - b) Name of Minister who will officiate.....
 - c) Owner's Burial Yes/No
 - d) Details of grave.....New / Existing Single / Double.....
 - e) Section, Row and plot number:

3. Name of Funeral Director.....
Address
Contact number:
Email address:

4. If you are the existing or new owner of the Exclusive Rights of Burial, please complete the information below:

Name of owner

Address
..... Postcode

Contact Number:

Email address:

Exclusive Right of Burial Number:.....

I consent to grave number: being opened for the burial of
the late

Signed: Date

5. When the registered owner(s) are deceased, in order for a further burial or memorial request to proceed, the Exclusive Right of Burial Deed needs to be transferred to the person(s) entitled to the rights. If you wish to register as the new owner, please provide / complete the following:

Did the grave owner leave a Will? Yes/No (Please attach a copy)

Alternatively, please provide:

Grant of Letters of Administration / Grant of Probate / Statutory Declaration

Name of applicant:

Relationship to the deceased

Address
..... Postcode

Contact number

Email address

Signed

Note: The person(s) named above will be registered as the grave owner(s) with the deed being made in his/her/their names(s). No memorial may be arranged, and no further interment may take place without the signed consent of the legal grave owner(s).

Declaration

I declare that to the best of my knowledge and belief that all particulars stated are accurate and correct. I confirm that I have read and understood the Guidance Notes and the Regulations for the use of St Saviours Cemetery.

Name:

Address

..... Postcode

Contact number

Signed Date

Fees:

Purchase of Rights

Interment

Cremations

Enclosed total fee £

Approved by Hungerford Town Council.....

Date.....

FOR OFFICE USE ONLY :

Burial Register Number:

Exclusive Right of Burial Number: