

# SWETTENHAM PARISH COUNCIL

## Interment Application Form

This application, when completed, must be returned to the Clerk, Swettenham Parish Council prior to any interment together with the appropriate fee and Burial Certificate/Disposal Notice

Title and Full name of Deceased  Address  Occupation (if retired, prior to retirement) Age Date of Death Address where death occurred	..... ..... ..... ..... ..... Years ..... ..... .....
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<u>Details of Burial Arrangements</u>  Day and Date of burial Time of Burial Name of Officiating Minister Type of Burial No. of Grave Space or Plot Dimensions of Coffin/Casket Name, Address & Telephone number of Gravedigger	..... ..... ..... Full (     )                  Cremated Remains (     ) ..... ..... ..... ..... Telephone number.....
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Details of family person applying for interment and acceptance of Cemetery Rules and Regulations	
Full Name .....	Relationship to Deceased.....
Address ..... ..... .....	
I accept and agree to abide by the Swettenham Cemetery Rules and Regulations for the time being and any future amendments	
Signature.....	Date .....

Details of Funeral Director	
Full Name .....	Signature .....
Address ..... ..... .....	Date .....
Telephone Number..... (It is the responsibility of the Funeral Director to ensure the removal of any monumental masonry after initial booking and by the time this form is submitted)	

Fee.....	Received.....	Burial Register.....	BC/DN.....
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