



Interment Application

Details of deceased

Deceased Full Name:

Last address:
.....
.....

Gender: Age at Death:

Date of Birth: Date of Death:

Interment Details

Type of internment : Burial / Cremated Remains (delete as appropriate)

Type of Grave : New Grave/ Re-opened / Child (up to 5'2) (delete as appropriate)

If child : Child/ Baby/ Stillborn /Miscarriage (delete as appropriate)

Is the chapel required: yes/no (delete as appropriate) Time required:

Type of Coffin (if applicable): Wicker/ Traditional (delete as appropriate)

Length of Coffin Width of coffin (in inches)

Date of Burial:

Time of Burial:

Special instructions: (including protruding handles)
.....
.....
.....



Family information

Contact Name:

Address:

.....

.....

Telephone:

Email:

Declaration: I confirm that the applicant and EROB holders listed below are authorised to arrange the interment of the name of the deceased; and that the information supplied is correct and addresses and signatures are authentic and that I have given received a copy of guidance notes including the council's pricing.

Signature: Date:

Print Name:

EROB Holders information

Name:

Address:

.....

Telephone:

Signature: Date:

Additional EROB Holder:

Name:

Address:

.....

Telephone:

Signature: Date:



Additional EROB Holder:

Name:

Address:
.....

Telephone:

Signature: Date:

Additional EROB Holder:

Name:

Address:
.....

Telephone:

Signature: Date:

Additional EROB Holder:

Name:

Address:
.....

Telephone:

Signature: Date:

Removal of Existing Memorial (if applicable)

Name of Stonemason :

Telephone: