

Grave No: Section ___ Plot ____

APPLICATION FOR INTERMENT AND / OR PURCHASE OF GRAVESPACE IN THE COUNCIL'S CEMETERY

DECEASED Name in full (Block Capitals) _____
 Address _____
 Date of Death _____ Age _____
 Former Occupation _____

APPLICANT Name in full (Block Capitals) _____
(Where a grave is purchased the Grant will be made out in this name) (Coffins must be biodegradable)
 Address _____

I hereby give notice to Sunninghill & Ascot Parish Council that it is my wish to inter the above-named deceased person in Sunninghill Cemetery on _____ day, the _____ day of _____ 20__ at _____ am/pm.

The Funeral Director is _____ who has / have my authority to make all the necessary arrangements.

Name of Minister (if applicable) _____

The fees for the interment are in accordance with the scale of charges fixed by the Parish Council and have been paid via BACS payment. Date: _____ Ref: _____ Reserved plot fees are nonrefundable.

Purchase of grave space & exclusive right of burial	£
Purchase of ashes grave space & exclusive right of burial	£
Purchase of grave space & exclusive right for child (1/2 size space)	£
Interment fee (due at time of burial)	£
TOTAL:	£

I / we hereby certify that I am / we are entitled to authorise this interment and that I /we indemnify Sunninghill & Ascot Parish Council against all claims and demands arising.

I / we hereby certify that I / we have the consent that the Parish Council can hold this personal data in compliance with the Data Protection Act 2018 solely for the purpose of administering the Parish Council's cemetery.

The Registrar's Certificate of Disposal, or the Coroner's Order, (where an inquest has been held) is attached, Cremation Certificate if an ashes plot is provided.

Signature (Applicant or Funeral Director) _____