

PARISH COUNCIL of DENMEAD
BURIAL GROUND
NOTICE OF INTERMENT

Plot No: _____ **Register Entry** _____ *[Office use only]*

This notice, **together with the certificate of burial/cremation**, is to be delivered to the Clerk between 9.30 a.m. and 1 p.m. at the address below at least three days prior to interment. Saturdays, Sundays and Public Holidays are excluded. Authorised copies of the application form will be returned to the funeral director and the applicant. The original application form will be retained on file. See Paragraph (3) of Regulations and Services.

1. Christian/Forename and Surname of the deceased: _____
2. Address of the deceased:

_____ Post Code: _____
3. Occupation: _____ 4. Age last birthday: _____
5. Denomination: _____ 6. Date and place of Death: _____
7. State if parishioner of Denmead **YES/NO** (See Burial Regulations Para 2)
8. Date and day of the week of burial: _____
9. Time of arrival at Burial Ground: _____ 9a. Coffin Size: _____
10. Description of grave e.g.: Burial, Cremation or Scattering:

Note: All graves will be DOUBLE DEPTH unless otherwise requested (See Regulation Paragraph (5a))

11. If grave is to be re-opened state name and particulars of previous interment, relationship to the person buried and Plot Number: _____

12. Name and address of officiating minister: _____
_____ Tel No: _____

13. Name, address and tel. no. of stonemason authorised to remove existing memorial if applicable:

14. Name, address and tel. number of the applicant, next of kin, near relative or legal representative:
Name: _____ Address: _____

Post Code: _____ Telephone No. (Incl. code) _____

15. Relationship to deceased: _____

16. I have read, understood and accept the regulations for the Denmead Burial Ground.

Signature of applicant: _____ Date: _____

17. Name and address of funeral director: _____
_____ Post Code: _____ Tel. No: _____

18. I have read, understood and accept the regulations for the Denmead Burial Ground.

19. Signature of funeral director: _____ Date: _____

----- (Office Use Only) -----

The Parish Council of Denmead hereby grants permission for the above-mentioned interment.

Signed on behalf of The Parish Council of Denmead: _____

Fee paid £ _____ Date: _____ Clerk to the Council

**The Parish Council of Denmead, The Old School, School Lane, Denmead, Waterlooville,
Hampshire PO7 6LU. Telephone: (023) 9224 7947**

PLEASE COMPLETE THIS FORM IN FULL

If this form is not fully completed, the Council's officer has been authorised to return it to the Funeral Director so delaying permission.

Revised and Effective from 1 April 2009