

Blackawton Cemetery
Application for a burial in Blackawton Cemetery

Deceased's Details

Surname of deceased:

Forenames (in full):

Sex:Age:

Home Address:
.....

Date of Death:

Where death occurred:

Entitled to Exclusive Right of Burial in existing grave yes / no / unsure

Deed of Grant attached yes / no

Grave

New Grave or Re-open:

Grave No:(if known)

Type of Grave (please circle): **General area or Cremation** **Double or Single**

If cremation please attach copy of Cremation Certificate.

Details of last interment (if applicable):

Removal of memorial (if applicable):Yes / No.....

In the case of graves to be purchased, state the name (in CAPITALS) and address of the person or persons to whom the Deed of Exclusive Right of Burial is to be issued (provide name, address, phone, and email):
.....
.....
.....
.....
.....
.....
.....
.....

New grants will be for a period of 100 years from date of grant.

Burial

Proposed Date of Burial: **Time:**

Proposed date to dig grave:.....

Minister:
.....
.....

Funeral Director:.....

Address:
.....

Phone:..... **Email:**.....

Funeral Directors may be asked to provide evidence of current Public Liability Insurance to the appropriate level.

Applicant's Details

Name:.....

Address.....
.....

Phone

Email

Relationship to the deceased:

I am entitled to Exclusive Right of Burial (EROB) **yes / no / unsure**

I confirm I am entitled to represent the descendants of the deceased and I am not aware of any contention or dispute.

The form must be signed by the applicant.

Please provide an attachment if there are additional owners of an existing EROB.

Signed

Date

Please submit this form to:

Annette Thom (Ms), Parish Clerk

FreeSpirit, Higher Street, Dittisham, Dartmouth, Devon, TQ6 0HT

Phone: 01803 722 417

In accordance with our responsibility under the Data Protection Act, the personal information on this form will be held by the Council and used in the management of the Cemetery.

OFFICE USE ONLY

Date received

Date approved/refused

Reason for refusal

Fees

Signature of Clerk to the Burial Authority

Date
