

Dursley Town Council - Notice of Interment

This notice must be delivered together with the certificate for disposal to the Clerk of Dursley Town Council, Jacob's House, Castle Street, Dursley, Gloucestershire GL11 4BS, not later than THREE CLEAR WORKING DAYS BEFORE THE PRE-ARRANGED TIME FOR THE BURIAL.

Funeral Directors Name.....

Address.....

Post Code.....Tel.....Email.....

Deceased's Details

Full Name of Deceased:.....

Address:

..... Post Code:.....

Age:..... Sex:..... Date of Death:.....

Place where death occurred:.....

Rank or profession of person to be interred (If a minor, name and residence of parents).....

.....

.....Postcode.....

Interment Details **Do not leave any fields unanswered – please tick the relevant box where appropriate**

Day and date of interment:	Time of interment:
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Name of Minister (if any) and Denomination:

Special Requirements relating to burial service:

Grave and Coffin Details (please tick all that apply)

Purchased Grave <input type="checkbox"/>	Public Grave <input type="checkbox"/>	New Grave <input type="checkbox"/>	Reopen <input type="checkbox"/>
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Full Grave Space <input type="checkbox"/>	Half Grave Space <input type="checkbox"/>	Childs Grave Space <input type="checkbox"/>	Garden of Remembrance Kingshill <input type="checkbox"/>	Garden of Rest St Mark's <input type="checkbox"/>
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Whether in dedicated, consecrated or unconsecrated ground:

Grave Number:.....	Depth of Grave:.....
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Coffin <input type="checkbox"/>	Ashes Casket <input type="checkbox"/>	Ashes Pouring <input type="checkbox"/>
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Coffin/Casket Dimensions (maximum measurements): Length _____ Width _____ Height _____ (from base to lid)	Grave Space Grid System for recording position of ashes Please check and agree with office Head of Grave Space <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 25%;">1</td> <td style="width: 25%;">3</td> <td style="width: 25%;">5</td> <td style="width: 25%;">7</td> </tr> <tr> <td>2</td> <td>4</td> <td>6</td> <td>8</td> </tr> </table> Please indicate depth	1	3	5	7	2	4	6	8
1	3	5	7						
2	4	6	8						

For interments in grave spaces in Kingshill Cemetery, please refer to box 1 (personal data) overleaf and complete either box 2, 3 or 4. For the Garden of Remembrance or Garden of Rest, please refer to box 1 (personal data) overleaf and complete box 5.

Personal Data

Box 1

I consent to my signature and contact details (Incl. name, address, contact number and email) being recorded and held in accordance with relevant Cemetery Legislation and Orders and for the purposes of communication with the Council in relation to the grave space and Cemetery. The processing of personal data is governed by legislation relating to personal data which applies in the United Kingdom including the General Data Protection Regulation (GDPR), the Data Protection Act 2018 and other legislation relating to personal data and rights such as the Human Rights Act. The Council's Privacy Notice is available on www.dursleytowncouncil.gov.uk or from the Council Office.

New Graves

Box 2

If the grave is to be purchased:

Full Name(s) of Purchaser(s):.....

Address:

..... Post Code:

Note: The person(s) named above will be registered as the grant holder(s) with the deed being made in his/her/their name(s). No memorial may be arranged or amended and no further interment may take place without the signed consent of the grant holder(s)

Purchased Graves, Conditions Covering Burial

1. The Exclusive Right of Burial is granted for a period of 30 years
2. A purchase agreement form must be signed.
3. The whole of the grave space will be levelled flat, grassed and mown by Cemetery staff
4. Subject to the Town Council granting permission, the grave owner may instruct suitably trained personnel to install a memorial, conditions and size restrictions apply.

The person applying for the burial must agree to the conditions above and outlined in the Cemetery Regulations and sign and date a separate purchase agreement to be attached to this form.

Previously Purchased Graves

Box 3

The Registered Owner of the Exclusive Right of Burial must give permission for the burial by signing below. If the owner is deceased, the person arranging the funeral should complete this section.

I consent to grave number being opened for the burial of the late

.....

Signed:Printed Name..... Date.....

Please contact the Town Council Office for any queries regarding transferring ownership of the Exclusive Right of Burial

Public Graves

Box 4

(To be completed in the case of a burial in a Public grave)

I fully understand that the burial of the late will be in a grave in which other unrelated persons are, or may be buried.

Full Name of Applicant:

Address:

..... Post Code:

Signed: Date:

Garden of Remembrance/Garden of Rest

Box 5

Name of next of kin or person arranging the funeral.....

Address.....

..... Post Code.....

Telephone.....Email.....

Signed: Date: