CROFT PARISH COUNCIL



Clerk to the Council: Samantha Walsh

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PO Box 10917

Leicester

LE9 3WP

APPLICATION FOR INTERMENT IN CROFT CEMETERY

| Name and address of applicant: | | | | | |
|--|--|---------------------------------------|--|--|--|
| Name | | | | | |
| Address | | | | | |
| Declaration by applicant: I have received a copy of the regulations and agree to be bound by them and pay the appropriate fee. I hereby apply for an interment as detailed below. | | | | | |
| Signed | Date | | | | |
| Name, address and telephone number of the Funeral Director taking responsibility for the arrangements and for payment of the fees due: | | | | | |
| Name | | | | | |
| Address | | | | | |
| Telephone No | | | | | |
| Detail of grave requested: New Grave/ | Re-opened Grave/Burial of Ashes/Scattering of Ashes | | | | |
| Plot No Coffin Size | Single/Double Depth | | | | |
| * If a new grave, please give full name and address of purchaser to whom the deed will be issued, if different from the applicant named above and complete form A on the next page * If a re-opened grave please give the full name and address of the holder of the exclusive right of burial if different from the applicant named above and complete either form B or C on the next page Name | | | | | |
| Address | | | | | |
| Title name and address of the navion t | a ha huwiad | | | | |
| Title, name and address of the person t | o be buried | | | | |
| Title Name | | | | | |
| | Registrary coroner o certificate No | | | | |
| Proposed funeral arrangements | | | | | |
| Day, Date and Time Faith/Denomination | | | | | |
| Name and address of Gravedigger | | | | | |
| Fees: Exclusive Right of Burial £ Interment £ Other £ Total £ | Payment: Cheque enclosed: Bank Transfer: Cheques payable to Croft Parish Council please or Bank Transfers to Co-op Bank: 08-92-99 65780653 | (for office use) Receipt No Deed No | | | |

| A | TO BE COMPLETED WHEN A NEW GRAVE/CREMATION PLOT IS BEING PURCHASED OR RESERVED * (*delete | e as applicable) |
|---|---|-----------------------------------|
| | I apply for the right of exclusive burial * and hereby consent to the opening of the grave for the purpose of the | e interment specified overleaf. |
| | Signature of purchaser | |
| | (or representative of person named below) | |
| | Title Name | |
| | Address | |
| | Relationship to the person you are making arrangements for | |
| | Note: All purchasers of graves are reminded that the erection of any permanent memorial will require the coand the payment of the appropriate fee. The authority reserves the right to remove any unauthorised form of planting in order that the area remains as a lawn cemetery. | of memorial, structure or |
| В | TO BE COMPLETED WHEN THE PERSON MAKING THE APPLICATION FOR THE INTERMENT IS THE PERSON NA AND THE GRANT IS ATTACHED | AMES IN THE GRAVE GRANT |
| | I confirm that I am the person named in the attached Grave Grant and I hereby consent to the opening of the interment specified overleaf. | grave for the purpose of the |
| | Signature of registered owner | |
| | Title Name | |
| | Address | |
| | I understand that the authority reserves the right to remove any unauthorised form of memorial, structure or remains as a lawn cemetery. | |
| С | TO BE COMPLETED IN ALL OTHER CASES | |
| | IN CONSIDERATION of Croft Parish Council (hereinafter called 'the Council') not insisting upon the production of the grave referred to overleaf and in consideration of the Council permitting me to bury/scatter *the rema | |
| | Title Name | |
| | Address | |
| | Relationship to the person already in the grave * | |
| | Relationship to the deceased person you are making arrangements for * | |
| | HEREBY UNDERTAKE TO INDEMNIFY THE Council from and against all actions, proceedings, loss, charges, dam demands which may be brought or made against the Council in consequence of the Council's consent to open and permitting the burial therein of the body/ashes of the said | |
| | Name of Deceased | - |
| | Dated this day of 20 | |
| | Signature of applicant | _ |
| | Witness (Name) | _ _ |
| | I understand that the authority reserves the right to remove any unauthorised form of memorial, structure or remains as a lawn cemetery. | r planting in order that the area |
| | NOTE: if you sign the indemnity form the Council will permit the grave to be opened for burial purposes with original Grave Grant but you should note that in signing this indemnity you are giving an undertaking to bear cost of any claim which might be brought by the owner or the heirs to the owner of the grave as a result of you the remains of the deceased person mentioned above in the grave. | all costs of the burial and the |