

SHERFIELD-ON-LODDON
PARISH COUNCIL



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Basingstoke
RG24 4QZ

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clerk@sherfieldonloddon-pc.gov.uk

APPLICATION FOR PERMISSION TO ERECT A HEADSTONE

Application no:

Mason's name and address	
Name of deceased	
Name and address of applicant (normally the next of kin)	
Number and section of plot	
Date of burial	
Brief description of memorial in accordance with drawing/photo supplied. Please note that applications will not be accepted unless a	

drawing/photo is supplied with full measurements	
First inscription	
Amount of remittance enclosed – made payable to Sherfield-on-Loddon Parish Council	£

I have read and accept the regulations for Sherfield-on-Loddon Cemetery

Signature of applicant:

Date

Please note that this form must be signed by the applicant (normally the next of kin), **not** the funeral director.