



NOTICE OF INTERMENT IN SHERFIELD ON LODDON BURIAL GROUND

Full name of the Deceased _____

Occupation (if under 18 years of age Name and address of parents _____

Age last birthday DOB _____ DOB _____

Last Residence of deceased _____
_____ (Since (date)) _____

Place of death _____

Day and Date of Funeral _____

Time the funeral will arrive at Cemetery _____

Officiating Minister _____

Denomination _____

If Grave already Purchased, state Section _____ Number _____
Section and Number of Grave, Grant Number _____ Date _____
Number of Grant and Date Purchased

Maximum overall Dimensions of Coffin/Casket Length _____ ft _____ in Width _____ ft _____ in

Please state whether coffin or cremains _____

FOR CEMETERY USE ONLY

Date payment received _____
Invoice No _____
Deed granted _____
Deed of Grant No _____
Date Deed sent _____

Grave No.....
Interment Fee
Exclusive Right
TOTAL _____

APPLICATION TO PURCHASE EXCLUSIVE RIGHT OF BURIAL IN A PRIVATE GRAVE

I DESIRE to purchase the exclusive right of burial in the grave in which the afore-named deceased is to be interred, and the following is my full name and address:

Full Name _____ (block letters) *Mr / Mrs / Ms

Address _____

_____ (Postcode) _____

Contact Telephone number _____

I have read and understood the Burial Ground Rules and Regulations for the Sherfield on Loddon Parish Council Burial Ground and agree to adhere to them.

Signature _____

Relationship to the deceased _____

Funeral Directors

Name _____

Address _____

Telephone number _____

Email Address _____