

NOTICE OF INTERMENT

All questions are to be answered in full and in block capitals. Completed forms must be faxed to the cemetery office (01727 835226) as soon as possible. The original form and Disposal Certificate or Burial Order must be received by the Cemeteries Manager, Cemetery Office, Hatfield Road Cemetery, St Albans, AL1 4LU, at least two clear working days prior to the interment.

DECEASED

Full Name

Address

Date of Death Place of Death

Age Marital Status

Gender Occupation

DETAILS OF INTERMENT

Burial or cremated remains..... Cemetery.....

Day..... Date Time

Officiant Denomination Chapel?

Exact external coffin/casket measurement (including handles)..... X

GRAVE DETAILS

Type (New / Reopen / Reserved / Reclaim / Ashes Plot / Public)

If new/reclaim/reserved state if single or double depth required

If reopening a grave or plot please state the number.....

If reopening a grave/plot give the name & date of last burial.....

Grave Owner's signature to authorise this interment.....
 (Where the owner is deceased and **already buried**, the Rights to the grave will need to be transferred **BEFORE** this burial takes place).

Memorial to be removed by
 (Memorials must be removed from the cemetery except for those on Section B at London Road)

APPLICANT

(for new graves this person will be shown as the grave owner)

Title Full Name

Address

..... Post Code

Relationship to Deceased

Signature of Applicant **Date**.....

I understand that if the burial is to take place in a lawn grave the regulations concerning memorials allowed on lawn graves have been explained to me. I also understand that my name & address may be disclosed to a funeral director or memorial mason (in accordance with the Data Protection Act).

FUNERAL DIRECTOR

Company..... Tel:

Address

Signature

For Office Use Only

Grave No Burial No Grant No

Paid £ Receipt No. Date

Office Use

Q		F		Disp.		X		NTC	
---	--	---	--	-------	--	---	--	-----	--