



## APPLICATION FOR INTERMENT IN URCHFONT COUNCIL CEMETERY

Please complete fully and accurately and return as soon as possible to the Clerk, Mr Bob Lunn, 14 Walnut Close, Urchfont, Devizes, Wilts., SN10 4RU (or by email to clerk@urchfont-pc.gov.uk)

### Details of Deceased

Surname	
Forename(s)	
Usual Address	
Age	
Profession / Trade / Retired	
If a minor, name and address of parents	
Date of Death	
Place where death occurred	

### Burial

Proposed Date and Time burial is to take place	Date:	Time:
Name of Officiating Minister		
Grave Space Number (if known)	Row:	Plot Number:
Section of Cemetery (Delete as appropriate)	Consecrated Ground	Un-consecrated Ground
Whether Exclusive Right of Burial in this grave already exists <b>OR</b>	YES / NO (delete as appropriate)	Existing Owner of Deed:

Whether Exclusive Right of Burial is to be purchased	YES / NO (Delete as appropriate)	Name and address to whom Deed is to be made:
Proposed Depth of Grave		

**Funeral Director**

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**Fee Enclosed (or to be forwarded separately if application made be email)**

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**Name and Signature of Applicant**

Name (BLOCK CAPITALS):	Signature:
Date of Application:	

**FOR UPC USE ONLY**

Date application received	
Date Fee Received	
Fee Correct	YES / NO
Date Grave Space Confirmed or allocated	
Date Approval Confirmation Sent	
Date Green Form / Cremation Certificate Received	
Date Entry made in Cemetery Records / Plan	