



## NOTICE OF INTERMENT

This notice should be completed and delivered to the Clerk to the Parish Council at the address given below three days prior to the interment. It MUST be accompanied by part B of the Certificate for Burial, together with the appropriate fee.

### DECEASED'S DETAILS

Full name of Deceased			
Last Residence Address of deceased			
Occupation	Age	Gender	Date of Death

### DETAILS OF SERVICE

Day and Date of Service	Time of Service
NAME OF MINISTER or person officiating	

### GRAVE DETAILS

IF EXISTING GRAVE PLEASE GIVE NUMBER OR LOCATION (if known)	
DEPTH OF NEW GRAVE	Please circle      Single / Double / Treble / Cremated remains
Section & Grave no:	Depth Required:
<b>Coffin Dimensions:</b> Length Max Width Height (from base to lid) Locking Handles? Yes/No (delete which doesn't apply) Please provide actual maximum measurements	

### FUNERAL DIRECTOR

Name: _____
Address: _____
_____ Postcode: _____
Telephone: _____ Email: _____

#### Office Use Only

Purchase	£
Interment	£
Transfer	£

Burial Register	
Deed prepared	
Grant Register	
Burial Register	

**NEW GRAVES**

**FULL NAME & ADDRESS** of purchaser of the .....  
exclusive right of burial for 50 years

.....  
..... Postcode.....

*Note: The person(s) named above will be registered as the grave owner(s) with the deed being made in their name(s). No memorial may be arranged and no further interments may take place without the signed consent of the grave owner(s).*

The Deed of Grant of Exclusive Right of Burial will be forwarded on completion and acceptance of this application.

Cemetery Rules – your attention is drawn to the Cemetery Regulations. A copy is attached to this application form, please note the Council does review the Regulations for its Cemetery annually and an up to date copy is available on the Council’s website.

I/We have read, accept and fully understand the Regulations for Swallow Lane Burial Ground.

Signed ..... Date .....

**PREVIOUSLY PURCHASED GRAVES**

The Registered Owner(s) of the Exclusive Right of Burial must give permission for the burial by signing below. If the owner is deceased, the person arranging the funeral should complete this section.

I, ..... consent to grave number..... being opened  
for the burial of the late .....

Signed ..... Date .....

*Please contact the Parish Council for any queries regarding transfer of the Exclusive Right of Burial.*

**Payment Enclosed (please refer to fee schedule)**

Exclusive Right of Burial	£
Interment Fee	£
Total payment	£

Please return this notice, with the appropriate payment to:

Clerk to Stoke Mandeville Parish Council  
Community Centre  
Eskdale Road  
Stoke Mandeville  
Bucks HP22 5UJ

Phone: 01296 613888 email: smparishcouncil@btconnect.com