

CROSCOMBE PARISH COUNCIL

Parish Clerk: Linda Roslyn
07734 742977
clerk@croscombeparishcouncil.co.uk

9 Tudor Pole Road
Glastonbury
BA6 9RD

APPLICATION TO ERECT A MEMORIAL

PLEASE COMPLETE ALL SECTIONS on this page

We apply for permission to erect the memorial described below and agree to comply with the regulations of the cemetery in connection with the execution of the work.

Name of Masons:- _____

Address:- _____

Telephone No:- _____ Date:- _____

DETAILS OF DECEASED

Full Name:- _____

Date of Death / Interment:- _____ Cemetery (please specify):- _____

Grave Number:- _____ Deed Number:- _____

I authorise this application and the execution of the work.

Signature of registered owner of the grave:- _____

Address:- _____

NOTE: If the owner of the grave is deceased, the ownership must be transferred before this application can be approved. No memorials can be erected on graves unless the exclusive right has been purchased.

FEES PAID AS PER TABLE OF FEES

Headstone - Lawn Section	£
Headstone - Old Part Cemetery (Above 3'6 (1070mm))	£
Kerbs - Old Part Cemetery Only	£
Vase	£
Second Inscription	£
<u>Garden of Rest - Street</u>	£
Flat tablet excluding vase	£
	TOTAL FEE £

DESIGN OF MEMORIAL

A Photograph or a drawing to scale of the proposed Memorial is to be shown here.

DIMENSIONS OF MEMORIALS	INSCRIPTION
Material to be used:- _____	
Headstone:- Height _____ Width _____	
Kerb:- Length _____ Width _____	
Landing Stone:- Length _____ Width _____	
Is landing stone to be placed above the surface of ground? _____	
Full description and size of any other items to be included _____	

EXISTING MEMORIAL

If there is already a Memorial on the grave, please give brief description:-

FOR OFFICE USE ONLY

Permit No:- _____ Receipt No:- _____

Date:- _____

You are hereby authorised to erect the Memorial or carry out the work on the grave space specified on this form in accordance with the design accompanying your application.