Notice of Interment - Full Burial

This notice must be completed and received by the Cemetery Office by **12 noon on the day preceding at least five clear working days** before the agreed interment date (or seven working days for a bricked grave) along with the certificate for burial.



Please also, if possible, email this form to the Cemetery Office as soon as the initial booking has been made.

Details of the Deceased								
Full name (Mr/Mrs/Miss/Ms)								
Address of the deceased								
Postcode								
Place of death								
Date of death Age								
If a minor, details of Parents or Guardians								
	_							
Resident Non-resident Grave owner: Yes No								
Details of Interment								
Cemetery Ashford Stanwell Staines Sunbury	_							
Day and date of burial Time								
Use of Chapel Yes No (Chapels at Ashford and Staines Cemeteries Only)								
Special Requirements Family to back fill grave Large attendance expected Other								
If other, please describe								
Details of grave New grave Lawn Traditional Child 24 Ho	ur							
Denomination Un-consecrated Un-consecrated								
Re-open Grave details if known: Section No.								
Depth of Grave Standard (depth for one, child grave or 24 hour plot, Stanwell Cemetery)								
☐ Depth for two Coffin / Casket size ☐ Coffin ☐ Casket ☐ Curved End Coffin ☐ Tear drop Coffin ☐ Tear drop Coffin ☐ Casket ☐ Curved End Coffin ☐ Casket ☐ Curved End Coffin ☐ Tear drop	n							
Actual coffin/casket size including handles in inches: HeadShoulderFootHeight								
HeadShoulderFootHeight								
\(\sum_{Foot} → \) \ \ \ \ \ Full Length of Coffin/Casket Material	_							
Memorial to be removed Yes No	_							
Full kerb Headstone Tablet Date when it will be removed								
Funeral Director or Arranger's details								
Name Date								
Address								
Email Phone								

Grave C	Dwnership)						
Name of D	Deceased							
Please tick	k statement	that apply to your c	ircumstances.					
		re-open and inter	a grave* se the opening and int	terment in	this grave.			
Name (of the last interred:	9			g			
2. Application for burial* Where the deceased is the/a grave owner, only a signature of the applicant for the burial is required. The ownership of the Exclusive Right of Burial must be transferred to the applicant to erect a memorial or arrange future burials.								
State ro	elationship er:							
For new listed o	w graves, on on the applic		gistered as the owner.	r. The deed	to the grave will	be issued to	the person	
4. App	lication for	burial in a public/u	npurchased grave**		a la alassa			
	•	3 3	e burial must sign the o			alamamifu Cona	lale e une e	
	Council, thei	ng of grave/plot no_ r Employees and Aç	a gents against any claim					
or will be,	buried and i	t is not desired to p	is to take place in a pu urchase a private grav nd that I will not be en	ve for this i	nterment. I also c	onfirm and a		
	A II							
Owner/	Applican	<u> </u>						
	Applican (Mr/Mrs/M							
	(Mr/Mrs/M							
Full name	(Mr/Mrs/M				Postcode			
Full name Home Add	(Mr/Mrs/M dress	iss/Ms)			Postcode			
Full name Home Add Telephone	(Mr/Mrs/M dress	iss/Ms)			Postcode			
Full name Home Add Telephone	(Mr/Mrs/M dress	iss/Ms)			Postcode			
Full name Home Add Telephone Email Signature	(Mr/Mrs/M dress	iss/Ms)						
Full name Home Add Telephone Email Signature (Registere	(Mr/Mrs/M dress e ed Owner)	iss/Ms)						
Full name Home Add Telephone Email Signature	(Mr/Mrs/M dress e ed Owner)	iss/Ms)						
Full name Home Add Telephone Email Signature (Registere Witness	(Mr/Mrs/M dress e ed Owner)	iss/Ms)						
Full name Home Add Telephone Email Signature (Registere Witness (F	(Mr/Mrs/M dresse ee ed Owner)	me)						
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Full name Home Add Telephone Email Signature (Registere Witness (F	(Mr/Mrs/Mdresse Owner) Print Full National Address	me)			Postcode			
Full name Home Add Telephone Email Signature (Registere Witness (F	(Mr/Mrs/Mdresse Owner) Print Full National Address	me)		Date	Postcode			