

WARRINGTON BOROUGH COUNCIL BEREAVEMENT SERVICES



CEMETERIES AND CREMATORIUM OFFICE, WALTON LEA CREMATORIUM
CHESTER ROAD, WALTON, WARRINGTON, WA4 6TB
TELEPHONE 01925 267731 FAX 01925 267732

NOTICE OF INTERMENT

THIS FORM MUST BE CAREFULLY AND ACCURATELY COMPLETED AND DELIVERED TO THE CEMETERIES AND CREMATORIUM OFFICE NO LATER THAN **3PM THREE DAYS BEFORE** THE INTERMENT IS DUE TO TAKE PLACE (EXCLUDING SATURDAYS, SUNDAYS AND PUBLIC HOLIDAYS)

WARRINGTON BOROUGH COUNCIL WILL NOT BE RESPONSIBLE FOR ANY MISUNDERSTANDING WITH REGARD TO ORDERS OR INSTRUCTIONS GIVEN BY TELEPHONE UNLESS IMMEDIATELY CONFIRMED IN WRITING.

A TABLE OF FEES AND CHARGES IS AVAILABLE FROM THE BEREAVEMENT SERVICES SECTION

Interment Request For

..... Cemetery

Please read the form carefully and ensure all information is correct before signing.



Details Of Deceased

Please tick appropriate box: Full Burial Cremated Remains

Name in full : Mr/Mrs/Miss

Address:

.....Postcode.....

Occupation Age Sex

Marital Status Date of Death Place of death

Cause of death:

Details Of Interment

Day of interment

Date of interment

Time of interment

Will relatives be present?

Details Of Service

Denomination

Where is service to be held?

.....

Name of Minister

Details Of Existing Grave

Denomination Section Grave No.

Name of registered owner

Address

.....Postcode.....Tel:

Signature

Please note, if the owner has previously died, the ownership must be legally transferred prior to the interment taking place.

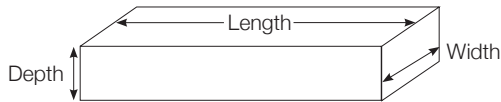
Please tick as appropriate

- Coffin
- Casket
- Wicker
- Other (please state)

- Poly Urn
- Poly Urn with plate and rings
- Metal Urn with plate and rings
- Wooden Casket
- Other (please state)

LengthFt Inches
 Width Inches
 Depth Inches

Length Inches
 Width Inches
 Depth Inches



Please note: that when the Funeral Director has made the booking on behalf of the family it is theirs or the family's responsibility to take the remains to the cemetery.

Details Of New Grave Required

Denomination

Please sign and tick the appropriate box to indicate the type of grave required.

Description of Grave	Signature
New lawn grave – purchase of Exclusive Right of Burial for a 50 year period.	
Interment in public grave	
Interment in a cremated remains grave– purchase of Exclusive Right of Burial for a 50 year period.	

Full name of applicant (including middle names) : Mr/Mrs/Miss

Address

.....Postcode.....

Tel.No. Email address

I hereby agree to abide by the cemeteries rules and regulations, details of which have been provided to me. I understand that I may not plant the grave or erect fencing, kerbs or place any other objects on or around the turfed area of the grave. I understand that if I wish to erect a memorial on the above grave space, the work must be carried out by a BRAMM registered stonemason and that I will be wholly responsible for its maintenance and safety. I hereby authorise Warrington Borough Council to remove the headstone should they find that the memorial has become unsafe or dilapidated.

Signature

Relationship to deceased

Signature of Funeral Director who is responsible for the completion of this form

.....

Name & Address of Funeral Director

.....

Telephone No.

For Office Use Only

CHECK LIST	Date	Initials
Notice of Interment		
Disposal certificate		
Grave Grant/ Lost deed declaration		
Casket Plate ordered		
Casket Plate delivered		
Entered in Register		
Entered on to BACAS		
Digging slip issued		
Letter re deceased owner		
Invoice prepared		
Receipt issued		
Remarks on digging slip entered into BACAS		
Grave Grant prepared		
Grave Grant sent to family		

Fees & Charges - For Office Use Only

ITEM	FEE PAYABLE
ERB	
Interment Fee	
Transfer/Lost deed declaration	
Headstone	
Kerbs and Landings	
Casket plate/End rings	
Hire of Chapel	
Other	
	Total £