

ABBOTTS ANN PARISH COUNCIL NOTICE OF BURIAL

This form is to be provided to the Parish Council along with the Registrar's Certificate for Disposal/Coroners Order for burial and the ERB Deed of Grant. Please ensure that the information is set out accurately.

SECTION ONE: THE DECEASED	
FULL NAME	
LAST PERMANENT ADDRESS	
PLACE OF DEATH	
DATE OF DEATH	
OCCUPATION	
RESIDENT OR NON-RESIDENT* (proof may be required)	
AGE	
SECTION TWO: THE FUNERAL	
BURIAL DATE	
BURIAL TIME	
FUNERAL ARRIVAL TIME	
NIARAE OF MINISTED	



SECTION THREE: THE INTERMENT

TYPE OF BURIAL PLOT	New Burial Plot (with purchased ERB)	nout		Complete Form Application to purchase ERB	
	Empty Burial Plot (w purchased ERB)	ith		Complete section 5 and provide ERB Deed of Grant	
	Burial Plot to be reopened			Complete section 5 and provide ERB Deed of Grant	
TYPE OF BURIAL		Coffin			
		Casket			
		Ashes C	asket		
SECTION FOUR: THE FUNERAL DIRECTOR					
NAME OF FUNERAL DIRECTOR					
COMPANY					
ADDRESS					
TELEPHONE NUMBER					
SIGNATURE AND DATE				1	



SECTION FIVE: CONSENT OF THE ERB HOLDER(S) FOR THE OPENING OR THE RE-OPENING OF A BURIAL PLOT AT SECTION THREE ABOVE

The Registered Owners(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.

below. If the owner is deceased, the p	erson arranging the funeral should complete this section.
I/We, the undersigned, hereby conser purpose of interring the late [nt to burial plot number [
I/we the undersigned have received them.	a copy of the Burial Ground Regulations and agree to adhere to
Owner One	
FULL NAME	
ADDRESS	
TELEPHONE	
SIGNATURE AND DATE	
Owner Two (if applicable)	
Owner Two (if applicable)	
FULL NAME	
4 DDD566	
ADDRESS	
TT: TD: 1045	
TELEPHONE	
SIGNATURE AND DATE	
Owner Three (if applicable)	<u></u>
FULL NAME	
4.000000	
ADDRESS	
TELEPHONE	
SIGNATURE AND DATE	
This section is for Davish Council Office and	
This section is for Parish Council Office use Plot Number:	<u>· only:</u> nent Fee paid: £
	p

Date of Parish Council approval (if required): Resident: Y / N