

Balderton Parish Council Balderton Village Centre Coronation Street, Balderton Nottinghamshire NG24 3BD

Tel: 01636 703626

Email: office@baldertonparishcouncil.gov.uk

Balderton Cemetery Memorial Application Form

Memorial Requirements

Maximum measurements for memorials are as follows:

Headstones		50" neight, 30" width		
Tablets in Garden	of Remembra	nce 18" length, 12" width, depth 4"		
Written approval	from Balderte	on Parish Council is required before any items are installed.		
		litions are online: Cemetery information		
_				
		permission for approval of a new Headstone / Additional		
Inscription / Cremat	ion tablet as fo	ollows:		
1 Mamarial a	upplier deteil	lo.		
1. Memorial s Business Name	uppner detail	15		
business name				
Address				
Occident Name				
Contact Name				
Phone number				
Email Address				
0. D. (-1) (()		I		
2. Details of the person interred				
Name				
Plot number (if known)				
,	ŕ			
3. Details of person purchasing the memorial				
Name				
Relationship to the deceased				
•				
Address				
Dhana musha				
Phone number				
Email Address				

4. Details of the	ne memorial	being applied for			
Description					
'					
Measurements					
Material					
Inscription details					
Has an image of	Yes/No				
_	163/110				
the proposed					
memorial been	/ 4 11 /1				
attached	(Application	s cannot be accepted w	thout an image)		
		Application Fee			
			ou an invoice. This must be paid as		
			ust not be installed until payment has		
been received by E	Balderton Par	ish Council.			
New memorial £158 (no VAT)					
Additional inscription £80 (no VAT)					
Cheques payable t	o 'Balderton	Parish Council' or BACS	bank transfer payments to		
Account name: Balderton Parish Council					
Sort code: 30-67-7	76				
Account number:	42232668				
Please use the nar	ne of the fund	eral director/memorial pr	ovider arranging the memorial (as		
detailed section 1)		•	3 3 1 1 1 (11		
detailed economic	0.0 0. 10101011				
5. Payment					
Planned method of payment					
Amount to be paid		£			
Amount to be paid		L			
6. Signature					
Signature					
Signature					
Nome					
Name					
D .					
Date					
Office use only					
Action		<u> </u>	Initials		
Application Approved		Yes/ No			
Applicant informed of decision		Date:			
Invoice sent to applicant		Date:			
Payment received		Date:			
Grounds team copied Grounds team use only		Date:			
Action	шу		Initials		
Memorial checked (as application)		Yes/ No	IIIIIIais		
memorial checked (as application)		. 30/ 110			