

SPROWSTON TOWN COUNCIL – CEMETERY
APPLICATION FOR INTERMENT IN A NON-PRIVATE GRAVE

NOTICE OF INTERMENT AT SPROWSTON CEMETERY

This form **must** be completed and received by Sprowston Town Council, Sprowston Diamond Centre, School Lane, Sprowston, Norwich, NR7 8TR, at least 2 clear working days prior to the funeral service. Please note that if this form is either not fully completely or received by the time stated, then burial may be delayed.

INTERMENT DETAILS

Date & Time of Burial at graveside	
Full Name of Deceased (Mr, Mrs, Ms, Miss, Other)	
Age of Deceased	
Last permanent address	
Name of person Officiating	
Religion of Deceased if appropriate	
Grave Number/Type Traditional/Cremated Remains/Child	
SIZE – please specify the following When stating the coffin size please give accurate coffin lid size only in order that we can make the necessary adjustment for grave size.	Coffin / Casket / Cremation Casket Outside measurement – length _____ Outside measurement – width _____ (include allowances for handles) Outside measurement – height _____
Depth of Grave required (Please note that although best endeavours will be made to ensure that the requested depth is achieved, this may not be possible due to coffin/casket sizes and/or ground conditions.	
Any special requests ?	
Funeral Director's Name Address Telephone No.	

TO BE COMPLETED BY THE APPLICANT

I hereby certify that the above details are correct and I have received a copy of the Rules & Regulations of the cemetery, and I will comply with them.

Signature of Applicant _____

Full Name of Applicant _____

Address _____

I fully understand that the deceased person named above is to be interred in an ordinary grave in which other persons are, or may be, buried and that I may not be able to purchase the Exclusive Right of Burial to the grave.

I further understand that no wooden cross, headstone or memorial of any kind including flower vase may be placed on the grave.

I understand that funeral flowers will be removed from the grave automatically three weeks after the funeral. In the event that they fade before hand then either the family or, on their instructions, the cemetery staff will remove them. This is to ensure that the grave is left looking as presentable and a fitting tribute as possible, to the deceased.

Signed _____ dated _____

Full Name of Applicant (PLEASE PRINT)	Mr / Mrs / Ms
Full Address of Applicant (PLEASE PRINT)	
Signature of Applicant (Please note this is to be signed by Next of Kin and NOT the Funeral Director or Hospital Representative)	
Dated	

N.B. INSTRUCTIONS FOR INTERMENT IN A NON-PRIVATE GRAVE WILL NOT BE ACCEPTED UNLESS THIS DECLARATION IS FULLY COMPLETED.

Consent Form

Your privacy is important to us and we would like to communicate with you regarding Sprowston Cemetery. To do so we need your consent. Please confirm your consent. You can find out more about how we use your data from our "Privacy Notice" which is available from our website or from the Council Office at Sprowston Recreation Ground, Recreation Ground Road, Sprowston, Norwich, NR7 8EW (01603 408063).

Yes, please, I would like to receive communication by telephone / post / email

Signed _____ dated _____