



LODE PARISH COUNCIL

3 Feast Close
Fordham
Ely
Cambs CB7 5PH
Email: clerk@lode-pc.gov.uk

NOTICE OF INTERMENT

THIS NOTICE is to be delivered to the above office at least 3 clear working days prior to an Interment.

Please complete the form below **carefully** and **accurately**.

Full Name(s) and Surname of Deceased

Age / Date of Birth of Deceased

Gender of Deceased

Home Address of Deceased

Place of death

Trade or Profession of Deceased.....

Date of Death At

Whether or not the Deceased is parishioner_

Date of Burial Time of Burial

New Grave No. Section

Re-Open Grave No. Section

Proposed Size of Grave: Length Width..... Depth

Coffin Type.....

Name and address of Applicant:

..... Postcode:

Relationship to Deceased:

Telephone No. Email.

EXCLUSIVE RIGHT OF BURIAL

Has the Exclusive Right of Burial (EROB) been purchased previously? (please circle) **Yes** or **No**

If yes please provide the following information:

Full Names of present owner

Address of present owner.....

..... Postcode:.....

Signature of present owner Date:

If the person applying for the interment is not the owner of the Exclusive Right of Burial then a transfer of burial rights will be required (please see the transfer of Burial Rights Form and Regulations for further information)

If Exclusive Rights of Burial have NOT been purchased previously, would you like to purchase them? (please circle) **Yes or No**

PLEASE NOTE EXCLUSIVE RIGHTS OF BURIAL CAN NO LONGER BE PRE-PURCHASED

A period of 12 months must elapse before you can erect a headstone on a grave. A memorial for a cremated remains plot requires 6 months to have elapsed before the laying of said stone. These time restrictions are to allow the ground to settle following interment.

Full name of Minister

Funeral Directors Name

Disposal Certificate No. or Coroners Burial Order

Funeral Director, please give your details below and sign, by signing you are confirming that you have given a copy of the Cemetery Regulations to the applicant.

Signature of Funeral Director Date:

Address:

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FOR OFFICIAL USE ONLY

Fees Received: Chq No. Date:

NOTE: FEES ARE DOUBLE FOR NON-PARISHIONERS (SEE TABLE OF FEES)