



**NOTICE OF INTERMENT IN SHERFIELD ON LODDON BURIAL GROUND**

Full name of the Deceased \_\_\_\_\_

Occupation (if under 18 years of age Name and address of parents \_\_\_\_\_

Age last birthday    DOB \_\_\_\_\_ DOB \_\_\_\_\_

Last Residence of deceased \_\_\_\_\_  
\_\_\_\_\_ (Since (date)) \_\_\_\_\_

Place of death \_\_\_\_\_

Day and Date of Funeral \_\_\_\_\_

Time the funeral will arrive at Cemetery \_\_\_\_\_

Officiating Minister \_\_\_\_\_

Denomination \_\_\_\_\_

If Grave already Purchased, state Section \_\_\_\_\_ Number \_\_\_\_\_  
Section and Number of Grave, Grant Number \_\_\_\_\_ Date \_\_\_\_\_  
Number of Grant and Date Purchased

Maximum overall Dimensions of Coffin/Casket    Length \_\_\_\_\_ ft \_\_\_\_\_ in    Width \_\_\_\_\_ ft \_\_\_\_\_ in

Please state whether coffin or cremains \_\_\_\_\_

**FOR CEMETERY USE ONLY**

Date payment received \_\_\_\_\_  
Invoice No \_\_\_\_\_  
Deed granted \_\_\_\_\_  
Deed of Grant No \_\_\_\_\_  
Date Deed sent \_\_\_\_\_

Grave No.....  
Interment Fee  
Exclusive Right  
TOTAL \_\_\_\_\_

I wish to purchase the exclusive right of burial in the grave in which the afore-named deceased is to be interred, and the following is my full name and address:

Full Name \_\_\_\_\_ (block letters) \*Mr / Mrs / Ms

Address \_\_\_\_\_

\_\_\_\_\_ (Postcode) \_\_\_\_\_

Contact Telephone number \_\_\_\_\_

Email Address \_\_\_\_\_

I have read and understood the Burial Ground Rules and Regulations for the Sherfield on Loddon Parish Council Burial Ground and agree to adhere to them.

Signature \_\_\_\_\_

Relationship to the deceased \_\_\_\_\_

Funeral Directors

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_

Email Address \_\_\_\_\_