**Notice of Interment**

**ALLUM LANE CEMETERY**

**Hertsmere Borough Council, Civic Offices, Elstree Way, Borehamwood, Herts, WD6 1WA**

[**cemetery@hertsmere.gov.uk**](mailto:cemetery@hertsmere.gov.uk)

**020 8207 7497**



|  |  |  |  |
| --- | --- | --- | --- |
| Grave Number |  | Register Number |  |
| Grant of Exclusive Right of Burial Number |  | Fees |  |
| Stonemason Permit Number |  | Invoice Number |  |

Notice of Interment must be returned to the Cemetery Officer at least three clear working days before the interment is due to take place.

Please complete both sides of this form where applicable.

All Interments are in accordance with the Rules and Regulations of the Council.

|  |  |  |  |
| --- | --- | --- | --- |
| Full name of deceased |  | | |
| Home address of deceased |  | | |
| Where death occurred |  | | |
| Age |  | Date of death |  |

Type of grave

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| New grave for 1 |  | New grave for 2 |  | New grave for 3 |  |
| Re-open for grave for 2 |  | Re-open grave for 3 |  | Common grave |  |
| New Ashes grave |  | Re-open Ashes grave |  | | |

Interment details

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of interment | | | | |  | | | | | | |
| Time of arrival at Cemetery | | | | |  | | | | | | |
| Type of coffin | Coffin | | |  | | Casket |  | Ashes Urn |  | Ashes Casket |  |
| Outside coffin size : | Length | | |  | | | Breadth | |  | | |
| Religion | |  | | | | | Name of Minister | |  | | |
| Funeral Director | |  | | | | | | | | | |
| Address |  | | | | | | Telephone number | |  | | |
|  | Email address | |  | | |
| Signed (Funeral Director) | | |  | | | | Date | |  | | |

Please complete and sign the relevant section

Part A – Request for the purchase of new grave

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full name of person requesting the interment | | |  | | |
| Address |  | | | Telephone number |  |
|  | Email address |  |
| Relationship to deceased | |  | | | |
| Signed |  | | | Date |  |

Part B – Request for the re-opening of an existing grave

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I am the grave owner of grave number | |  | | |
| Full name of grave owner | |  | | |
| Address |  | | Telephone number |  |
|  | Email address |  |
| Relationship to deceased | |  | | |
| Name and date of last person interred | |  | | |
| Signed |  | | Date |  |

Part C – Request for the re-opening of an existing grave where the Grant of Exclusive Right of Burial (Deed) owner is the deceased (\*a questionnaire for the Transfer of Burial Rights will be sent following the interment)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full name of grave owner | |  | | | |
| I am next of kin/executor/administrator of the estate of the grave owner of grave number | | | | |  |
| Full name |  | | | | |
| Address |  | | Telephone number |  | |
|  | Email address |  | |
| Relationship to deceased | |  | | | |
| Name and date of last person interred | |  | | | |
| Signed |  | | Date |  | |

Part D – Request for an interment in a Common Grave

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| It is fully understood that the deceased is to be buried in a Common Grave in which other people are buried. | | | | |
| Full name |  | | | |
| Address |  | | Telephone number |  |
|  | Email address |  |
| Relationship to deceased | |  | | |
| Signed |  | | Date |  |