



SHILDON TOWN COUNCIL
West Road Cemetery, Shildon
NOTICE OF INTERMENT

- 1) Full name of the person to be interred _____
- 2) Address of person to be interred _____
- 3) Age of person to be interred _____ Date of Death _____
- 4) Place where death occurred _____ Duration/Time at residence _____
- 5) Burial: Day _____ Date _____ Time _____
- 6) Name of Minister (if any) _____ Grave Space No. _____
- 7) Depth of Grave to be dug: Single Re-Opener Double Child Ashes
- 8) Actual Coffin/Ashes Casket Size (Length _____ Width _____ Depth _____)
- 9) Whether the exclusive Right of Burial in perpetuity or for a limited period has been purchased, and who is now the owner of such right
- 10) Ownership Details:
 - a) New Purchased Grave Space
 - b) Existing Exclusive Right of Burial
 - c) Family Ashes RequestName _____ Relationship to Deceased _____
Address _____
Email _____ Signature of Applicant _____
- 11) Graves will automatically be turfed within 6 months following interment.
If you wish for the grave to remain unfurfed you are responsible for the upkeep and maintenance of the grave. Please tick here
If the grave is left unattended for a period of 6 months, you will be advised of the Council's intention to turf the grave.
- 12) Is there an existing headstone to be removed? Yes/No
If yes, it is the responsibility of the undertaker to organise removal.
- 13) Cemetery Information & regulations provided to the family? Yes/No
- 14) Name/Contact details of Funeral Director _____
Signature of Funeral Director _____

I hereby consent to the foregoing application.

Signature _____

Owner for the time being of the exclusive right of the burial

Date _____