

**NOTICE OF INTERMENT
of BURIAL / ASHES**

**for the RE-OPENING/PRE-PURCHASED of a Grave/Memorial Plot/Wall of
Remembrance/Columbarium/Ash Vault/Formal Kerbstone/Catacomb (delete as applicable)**

No. PLOT/SECTION No CEMETERY

Interment arranged for (day) (date) (time) DIRECT / CHAPEL (delete)

Full name of deceased

Permanent Address of Deceased

Date of Death Place where death occurred Age last birthday

Whether: Single / Married / Civil Partner / Widowed / Divorced Occupation

Outside dimensions of coffin/casket: Length Width Depth

Minister Name of Church Church Service Time

Grave Deed enclosed: Yes / No Grave Depth

Ashes to be brought on the day by: Family / Funeral Director / collected from crematorium (delete as appropriate)

Details of Previous Interments : Name Date
or Pre-purchased

Signature of FD..... Print Date

Company Name and Address

Postcode Telephone

I, the undersigned, hereby consent to the above grave being opened for the purpose of interring the late

.....
Signature of Applicant Print Date

Address

..... Postcode Telephone

This form is to be delivered at least **48 hours prior to the date of** interment, excluding Saturdays, Sundays and Bank Holidays, duly completed together with a cheque (made payable to Cheshire East Council) to appropriate cemetery office.

FOR OFFICE USE: Amount £ Receipt No Burial No