

MEMORIAL APPLICATION

New Memorial / Additional Inscription / Replacement / Maintenance (delete as appropriate)

GRAVE/PLOT/WofR NO. PLOT/SECTION NO CEMETERY

TO BE FILLED IN BY THE GRAVE OWNER:

I (full name)

Address

.....

Being the only person entitled to the Exclusive Right of Burial in Grave/Plot/WallofRem No.

plot/section at Cemetery, apply for permission for the work to be carried out as detailed below on the aforementioned grave/plot space and in accordance with the Council's Cemetery Rules. If required by the Council I will produce the Burial Grant as evidence of ownership of the Exclusive Right of Burial.

Signature Print Date

TO BE COMPLETED BY THE CONTRACTOR EMPLOYED TO CARRY OUT THE WORK:

I hereby apply to carry out the work as detailed below and in accordance with the Council's Cemetery Rules. I confirm that the business is licensed with the Cheshire East Borough Council's Memorial Mason Scheme or BRAMM and that all works will comply with the Cheshire East Borough Council Cemeteries Rules and Regulations in compliance with the Cemeteries registration scheme.

Signature of Contractor Date

Name of Contractor

Business Address

.....

Business Tel No

BRAMM Registration No Expiry Date

BRAMM fixer Registration No(s) Expiry Date(s)

This form is to be delivered duly completed together with a cheque (made payable to Cheshire East Council) to:

Cemetery Office, Market Close, Crewe, CW1 2NA
Cemetery Administration Office, Westfields, Middlewich Road, Sandbach, CW11 1HZ
Cemetery Lodge, Prestbury Road, Macclesfield, SK10 3BU

(Delete as applicable)

FOR OFFICE USE: Amount £ Receipt No Permit No

Recorded in Cemetery Register Recorded on BACAS

A detailed drawing showing dimensions and type of material must be given here:

Proposed colour and material to be used

Type of ground anchor system

Full name of deceased

Proposed inscription(s) or detail of other work: