

This form must be Fully Completed and received by the Cemetery Office not later than 10.00am. TWO CLEAR WORKING DAYS before the funeral.

Please note that if this form is either not fully completed or received by the time stated, the burial may be delayed.



**JULIAN TOWNSEND**  
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**1d**

## Notice of Interment

### Cemetery: \_\_\_\_\_

BURIAL DETAILS (PLEASE TICK)						
	5'	7'	Ashes (GOR)	Ashes (GRAVE)		
New plot						Plinth
Re-open					Chapel	Grave side service
1. Date of burial:				2. Time:		
3. Full name of deceased. (If stillborn, please insert the full names of both parents):						
4. Last permanent address:						
5. Place of death:						
6. Age of deceased:			7. Date of death:			
8. Name of minister officiating:						
9. Size of coffin/casket. (Sizes to be outside lid measurements with allowance for handles):			Length:		Width:	
10. Mourners to backfill grave? Yes / No. If 'yes' can shoring be removed during backfill? Yes / No Following burial the ground will be consolidated to allow safe re-instatement.						
11. Name, address and telephone number of Funeral Director:						
<p>TO BE COMPLETED BY APPLICANT: I hereby certify that the above particulars are correct and I have read and understood the 'Helping You' follow cemeteries guidelines.</p> <div style="display: flex; justify-content: space-between;"> <div> <p>Signature of applicant</p> <p>Full name of applicant</p> <p>Address</p> </div> <div> <p>Date</p> <p>Post Code</p> <p>Telephone Number</p> </div> </div>						

# **Application for the Re-Opening of a Purchased Grave and Consent to Burial by Original Purchaser of Exclusive Right of Burial**

**2d**

I hereby authorise Grave No.

In \_\_\_\_\_ Cemetery to be opened for the interment of the deceased person named on this order.

Is deed of ownership attached: Yes / No

Full name of registered owner (PLEASE PRINT) Mr/Mrs/Ms: \_\_\_\_\_

Full address (PLEASE PRINT): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post Code: \_\_\_\_\_

Relationship to deceased: \_\_\_\_\_

I certify that the above particulars are correct and hereby undertake to indemnify Amber Valley Borough Council and all its Officers and Members against any claim whatsoever relating to the grave, its ownership, or the Exclusive Right of Burial therein.

I also understand that any memorial on the grave will need to be removed and re-fixed and that this work will not be the responsibility of the Council.

Signature of registered owner: \_\_\_\_\_ Date: \_\_\_\_\_

**NB: If the Deed of grant is not able to be produced the following must be completed.**

I \_\_\_\_\_ (full name PLEASE PRINT) being the registered owner of the grant of Exclusive Right of Burial in the above grave space and not having produced documentary proof of ownership, take full responsibility for the opening of the grave and the interment of the deceased person named in this order. I hereby indemnify Amber Valley Borough Council and all its Officers and Members against any liability.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

