

**Notice of Interment**

This Notice of Interment is confirmation of the telephone booking and is to be delivered to the Cemeteries Officer at the address above, two working days prior to any interment. If the Interment is to take place in a vault or brick grave, three working days' notice is required (exclusive of Saturday, Sunday and Bank Holidays). It is particularly requested that the form is completed carefully and accurately.

**PLEASE USE CAPITAL LETTERS**

Cemetery:	Date of Burial:	Time:
Grave Number:	Section:	Exact External Coffin Size:
Full Name of Deceased:		
Date Of Death:	Age:	Male / Female
Address of Deceased:		
Postcode:		
Address Where Death Occurred:		
Postcode:		
Chapel Required: Yes / No		
Officiant Name:		
Number of Interments Required in Grave:		
Name & Address of Applicant/Grave Rights Owner:		
Postcode:	Landline Contact Number:	
Email Address:	Mobile Contact Number:	
Signature of Applicant\Grave Owner:		
Name and Address of Funeral Director:		
Postcode:		
Funeral Director (Company):		
Arranger/Contact Name:		
Tel No:	Fax No:	
Email Address:		



**TO BE COMPLETED BY THE APPLICANT**

I hereby certify that the above particulars are correct and that I have been made aware of the Erewash/Broxtowe Borough Council's Cemetery 'Rules and Regulations' that apply to this cemetery (and how to obtain them) and, having read them or not, I accept that I am legally bound by them and will uphold (and abide by) them.

Signature of Applicant: .....

Date: .....

Full name of applicant: .....

Address: .....

.....

.....

Postcode: ..... Landline Contact Number: .....

Mobile Contact Number:.....

**In the event the body is buried without a coffin, please complete the following: -**

The body of the deceased named overleaf has been interred without a coffin and, therefore, had no external form of identification.

I confirm that: - **(DELETE AS APPLICABLE)**

1/ The deceased was known to me personally and my involvement with this interment enabled me to confirm that there was no doubt that the body interred was that of the person named overleaf.

2/ Having no personal knowledge of the deceased, the identity of the deceased was confirmed to me by: \_\_\_\_\_ (Print Name)

Relationship to the Deceased: \_\_\_\_\_

and I was satisfied that there was no doubt as to the identity of the deceased.

Signed: \_\_\_\_\_ Authorised Community Representative

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Privacy Notice**

The information you provide Broxtowe Borough Council will be used to record the death and burial details of the deceased. The information provided is deemed a matter of public record. You should therefore be aware that these details can be viewed by any member of the public via the hard copy records. You should also be aware that in the future these records will be made accessible for the public to view on the internet.