

Burial in an existing grave in	Cemetery
Day of week, date and time of burial	
Title	Mr/Mrs/Ms/Miss/other _____
Name of deceased in full	_____ <i>(full burial / cremated remains) * please delete as necessary</i>
Usual place of residence	_____ Postcode
Age , Sex and Date of Death	Age                      Sex                      D.o.D
Marital Status	Unknown, married, single, widowed * <i>please delete as necessary</i>
Maiden name if applicable	
Chapel required	Yes / No                      Name of Minister
Religion of deceased	
Grave Details: A) Section, Grave Number & Class	A) Section: _____ Grave No. _____ Class _____
B) Full name of the last person buried	B) _____
C) Date of last burial	C) _____
D) Type of memorial on the grave	D) _____
Maximum outside dimensions of <i>(do not add on for handles)</i>	Coffin / casket _____ (length/ width/ height) Cr. Casket / urn _____ (length/ width/ height)
Any additional requirements	
Name & address of Funeral Director / Arranger of this burial	Telephone No.: _____ Fax: _____

**ONE OF THE DECLARATIONS ON THE REVERSE OF THIS FORM MUST BE COMPLETED**

*For office use only*

Burial	£	Invoice	Depth Req.	Deed p/e/r	BACAS checked
Memorial	£				
Chapel	£	Cheque	Digging slip	T.O.O. / Deed ext.	Signed 1
Casket / urn	£				
Other	£	Receipt	R/R - NAMM	Survey/booklets	Signed 2
<b>Total</b>	£				

**1. REOPENING A PURCHASED GRAVE WITH THE AUTHORITY OF THE REGISTERED OWNER**

I (Mr/Mrs/Miss/Ms - Name in full) \_\_\_\_\_ (the undersigned)

Of (full postal address) \_\_\_\_\_

Postcode \_\_\_\_\_ Day Tel no. \_\_\_\_\_ Evening Tel No. \_\_\_\_\_

being the registered owner of the grave in \_\_\_\_\_ Cemetery, Section: \_\_\_\_\_ No: \_\_\_\_\_ hereby authorise the opening of the said space for the burial of the person named overleaf.

I hereby undertake to indemnify & keep indemnified the London Borough of Richmond, their officers & agents against all actions proceeding claims & demands, cost, damages, & expenses which may be brought against the council which would not have arisen if this authority had not been granted.

Signed \_\_\_\_\_

Witness to the above signature \_\_\_\_\_ Dated \_\_\_\_\_

Witness's full name and address \_\_\_\_\_

**2. REOPENING A PURCHASED GRAVE FOR BURIAL OF THE REGISTERED OWNER OR PERSON NAMED ON THE DEED**

I (Mr/ Mrs/ Miss / Ms) \_\_\_\_\_ (the undersigned)

Of (full postal address): \_\_\_\_\_

Postcode \_\_\_\_\_ Day Tel no. \_\_\_\_\_ Evening Tel No. \_\_\_\_\_

being the \_\_\_\_\_ (state the relationship to the deceased e.g. Executor / Husband etc)

request the opening of the grave in \_\_\_\_\_ Cemetery, Section: \_\_\_\_\_ No.: \_\_\_\_\_ for the burial of the person named overleaf who is the registered owner / named on the deed.

I hereby undertake to indemnify and keep indemnified the London Borough of Richmond, their officers and agents against all actions proceeding claims and demands, cost, damages, and expenses which may be brought against the council which would not have arisen if this authority had not been granted.

Note: Where the person or cremated remains to be buried is the registered owner, any further burial in, or work on, the grave space can only be authorised by the successor in title to the registered owner, following the transfer of ownership by them. The cemetery office will send you further information after the burial has taken place.

Signed \_\_\_\_\_ Dated \_\_\_\_\_

Witness to the above signature \_\_\_\_\_ Dated \_\_\_\_\_

Witness's full name and address \_\_\_\_\_

**THE DEED OF THE EXCLUSIVE RIGHT OF BURIAL MUST BE SUBMITTED WITH THIS AUTHORISATION**

The Cemetery Office, East Sheen Cemetery, Sheen Road, Richmond, TW10 5BJ.