

Permit Number: <small>(For office use only)</small>	Invoice No.:	Fee:	Interment No.:
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REDDITCH CREMATORIUM, BORDESLEY LANE, REDDITCH, WORCS. B97 6RR
 TELEPHONE: 01527 62174

APPLICATION for a PERMIT to ERECT, INSCRIBE or RENOVATE a MEMORIAL

DELAYS IN ISSUING A PERMIT MAY OCCUR WHERE THE APPLICATION IS MADE:-

- * without providing ALL THE REQUIRED INFORMATION
- * without the LEGAL RIGHT to place and maintain a memorial on the grave.
- * without payment of the CORRECT FEE

PERMIT ISSUED	
SIGNED	DATED

ALL WORK INVOLVING REMOVAL OF A MEMORIAL REQUIRES A PERMIT.

DETAILS OF GRAVE ON WHICH WORK IS TO TAKE PLACE

Cemetery	<input style="width: 90%;" type="text"/>	Grave number	<input style="width: 90%;" type="text"/>	Deed number	<input style="width: 90%;" type="text"/>
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Name & Address of REGISTERED OWNER of Exclusive Right of Burial

DETAILS OF APPLICANT

Full Name:

Address:

Tel. Number;

DESCRIPTION OF PROPOSED WORK, MATERIALS AND DIMENSIONS

Headstone <input type="checkbox"/>	Book <input type="checkbox"/>	Cross <input type="checkbox"/>	Tablet <input type="checkbox"/>	Other <input type="checkbox"/>
New <input type="checkbox"/>	Replacement <input type="checkbox"/>	Additional Inscription. <input type="checkbox"/>	Renovation <input type="checkbox"/>	

Type of Stone e.g. red granite

Inscription

Add surname of deceased if not in inscription.

Dimensions

OVERALL HEIGHT, WIDTH & DEPTH :

Please provide an illustration.
All parts to be described including any additional foundation slab

Intended Date of Removal of Existing Memorial
(if applicable)

Intended Date of Fixing

THE APPLICANT MUST COMPLETE AND SIGN THE DECLARATION OVERLEAF.

DECLARATION BY THE APPLICANT

1

I AM THE OWNER OF EXCLUSIVE RIGHT OF BURIAL IN THE ABOVE GRAVE.

OR

2

I HAVE PROVIDED WITH THIS APPLICATION THE WRITTEN PERMISSION OF THE OWNER OF EXCLUSIVE RIGHT OF BURIAL IN THE ABOVE GRAVE.

OR

3

I AM THE APPLICANT FOR THE FUNERAL OF THE DECEASED PERSON NAMED IN THE PROPOSED INSCRIPTION AND BURIED IN THE GRAVE. INSCRIPTION TO BE ENTERED ON AN EXISTING HEADSTONE ONLY.

THE MEMORIAL YOU INTEND TO HAVE ERECTED HAS GREAT PERSONAL AND FINANCIAL VALUE. YOU ARE STRONGLY RECOMMENDED TO PURCHASE INSURANCE AGAINST LOSS OR DAMAGE

Memorial Mason Contact Details:

***I REQUEST THAT A PERMIT BE ISSUED TO >>>>>>>>>
TO ALLOW THE ERECTION, INSCRIPTION OR RENOVATION
OF A MEMORIAL ON A GRAVE AS DESCRIBED OVERLEAF,
I HAVE READ AND UNDERSTOOD THE INFORMATION CONTAINED
WITHIN THIS DOCUMENT.***

Tel.

SIGNED

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DATED

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PLEASE ASK YOUR MEMORIAL MASON FOR A FULL GUIDE TO COMPLETION OF THIS APPLICATION

Privacy Notice

Why do we collect this information?

We need the personal information you supply on this form so that we can provide the memorial of your choice with the wording you provide, collect your payment, and contact you when your lease is coming up for renewal. The legal basis for collecting this information is that it forms a contract.

What information is collected?

- Your name, address, phone number, signature
- Details of your memorial

Who has access to the information?

This information will be accessible to the staff working in the Bereavement team at Bromsgrove District Council and Redditch Borough Council.

This information will not be shared with or sold to any other service or organisation unless we have a duty to do so under law.

Is the information sent outside the EEA?

This information will not be transferred outside of the European Economic Area.

How long is the information kept?

The memorial information will be kept for the length of the lease plus two years.

If you pay for your memorial by bank card over the phone, the payment information will be kept for six years. Your card details (numbers etc) will not be kept on the system.

Are any automated decisions made using this information?

No decisions around this information are made by automated means.

Your rights

Your statutory rights and other privacy information is available on the Bromsgrove District Council/Redditch Borough Council website.