

Application of Interment

Applications must be delivered to Watchet Town Council no later than noon 3 working days prior to interment

All fees and charges must be paid in advance at the time of delivery of this notice

Hours of Interment: Between 10am and 6pm from 25 March to 29 September
Between 10am and 4pm from 29 September to 25 March

NO Interments are permitted on Sundays, Christmas Day or Good Friday

It is requested that the following applicable particulars be carefully and accurately set forth:

SECTION A – Details of the Deceased

Deceased	First Name(s) & Surname of person to be buried:	
	Maiden Name (if applicable):	
Date of Birth:	Date of Death:	Place in which death occurred:
	Age at Death:	
Home Address (address of deceased prior to being in residential care if applicable):		
Religious Denomination (if applicable):		Occupation (before retirement):

SECTION B – Details of Applicant(s)

Applicant(s)	First Name(s) & Surname:	
	Maiden Name (if applicable):	
Relationship to deceased:	Date of Birth:	
Home Address:		
Contact details:		
Email:	Phone:	
Next of Kin <small>(if different from applicant)</small>	Name:	Relation to the deceased:
	Address:	
	Telephone:	Email:

SECTION C – Details of Grave

Section C1 To be completed if no pre-purchased plot has been assigned		
New Grave	Plot to be purchased:	Is the Deed to be issued in the name of the applicant: Yes / No

SECTION C – Details of Grave (Continued)

Section C2 To be completed by the owner of the grave or their next of kin where the Deceased is the grave owner

Pre-Purchased Plot	Plot to be opened:	Does the Deed of Grant now require transferring to Next of Kin or Other? If Yes, Who*?
	Please Select: <div style="display: flex; justify-content: space-around;"> First Interment Or Second Interment </div> (if second interment, please complete the section below)	

Details of First Interment (if applicable / known / details held):

First Name(s) & Surname of person interred:

Date of Death:

Age at Death:

Date of Burial:

Description of / Inscription on Memorial Stone:

Please read and delete as appropriate:

I am the registered owner of the grave / next of kin / executor of the owner:

(legal documentation will be required to ensure the rightful owner of the plot before interment can take place)

If none of the above please state your relationship to the deceased grave owner*:

* Watchet Town Council can only authorise the opening of a purchased grave with the permission of the owner or to inter the owner. In all other cases, ownership must be transferred to someone who can legally prove that they are entitled to receive these ownership rights. Whilst the Council will offer all assistance in establishing the means of transfer and the issue of the relevant forms, responsibility remains with the funeral arranger to have clarified this matter before booking.

Signed:

Date:

Print Name:

SECTION D – Funeral Director information

To be completed by the Funeral Director responsible to for above interment

Interment Details	Day:	Type of burial:	Proposed Depth of Burial:
	Date:	a) Ashes Burial	a) Single
	Time:	b) Full Burial	b) Double
	Plot No:		
	Officiating Minister:		

Funeral Director	Name:		
	Address:		
	Telephone:	Email:	

Has a Health & Safety Risk assessment and method statement been completed for this interment?

Yes

No

Coffin Details	Coffin Size: Height: Width: Depth:		Coffin Type (please circle):	Composite Material Page 3 Shroud	Wooden
	Other.....				
Gravedigger details	Name:				
	Address:				
Telephone:			Email:		
Is Shoring required for the interment to take place? <small>(If a person must enter the grave to a depth of more than 1mtr – shoring is required, please ensure this is stated on the gravedigger Health & Safety Risk Assessment)</small>			Yes	No	
Has the gravedigger provided a Health & Safety Risk assessment and method statement for this interment? <small>(If no, please ensure this is provided before the interment takes place)</small>			Yes	No	
Grave digging plot measurements	Height:	Width:	Depth:		
Please confirm agreement to forward the Gravedigger instructions to the above-named Gravedigger on confirmation of the proposed interment from Watchet Town Council.			Yes	No	
<p>Please read before signing below:</p> <p>We have read and fully understand the Watchet Cemetery Policy and agree to abide by this.</p> <p>We have conducted a full Health & Safety Risk assessment for this individual interment and in the event of any damage or injury caused by the funeral directors or gravedigger, indemnify Watchet Town Council against any claims that may arise.</p> <p>We have seen the original Deed of Grant for the proposed grave, and we are satisfied that the identity of the grave owner is correct.</p>					
Funeral Director Signature:			Date:		
Print Name:					