

Memorial Permit Application

A permit is required for **all** memorial works in a cemetery.

SECTION 1: DETAILS OF GRAVE

Cemetery Section	Grave Number	Deed of Grant Number

SECTION 2: DETAILS OF APPLICANT

Full name of applicant: Ms Miss Mrs Mr Other: _____

Address: _____

Postcode: _____

Email: _____

Telephone: _____

DECLARATION BY APPLICANT (Tick as appropriate)

- A. **I AM/WE ARE** the registered owner(s) of the Exclusive Rights of Burial as recorded on the Deed of Grant and hereby apply for a memorial permit to be issued subject to the regulations of Watchet Town Council.
- B. **I AM NOT** the registered owner of the Exclusive Rights of Burial as recorded on the Deed of Grant. I have read the 'Grave Ownership and Deed Transferal' leaflet provided by Watchet Town Council, and attach the correct evidence required to this application.
- C. **I AM NOT** the registered owner of the Exclusive Rights of Burial as recorded on the Deed of Grant. I am a relative of the person buried in the grave but it is impractical for me to trace the rightful owner and I hereby apply for a memorial permit to be issued to place and maintain, or add an inscription on a memorial on the grave. I further declare that should the rightful owner be traced I agree to remove the memorial at my expense if requested (New headstone placements only). I have completed and signed a 'Statutory Declaration' in the presence of a Magistrate or Commissioner of Oaths.

I/we understand that I/we am responsible for the maintenance of the memorial and that the council may take any action they deem necessary should the memorial become unsafe or dilapidated. I/we also understand that the memorial may be removed temporarily to allow burials in adjacent graves of this grave.

Signature(s): _____

Date: _____

SECTION 3: DETAILS OF MEMORIAL MASON

Name of Memorial Mason

Full address including postcode:

NAMM/BRAMM Registration Number:

Telephone:

Email:

SECTION 4: DETAILS OF MEMORIAL WORKS

1. MEMORIAL PERMIT TYPE (Tick as appropriate)

NEW HEADSTONE (Grave) <input type="checkbox"/>	NEW HEADSTONE (Cremation Plot) <input type="checkbox"/>	NEW HEADSTONE & KERBS <input type="checkbox"/>
NEW STONE VASE/TABLET <input type="checkbox"/>	NEW WOODEN CROSS (Permanent) <input type="checkbox"/>	EXISTING MEMORIAL (modification or inscription) <input type="checkbox"/>

2. MEMORIAL DETAILS

Nature of works and materials used

INSCRIPTION

MEMORIAL DRAWING

3. MEMORIAL DIMENSIONS

	Height	Width	Depth
MEMORIAL			
MEMORIAL BASE			
KERBS			
FOUNDATION			

FOR OFFICE USE ONLY

Permit No:

Permit Fee:

Date Received:

Date Permit sent: