

BROUGHTON ASTLEY PARISH COUNCIL

NO. IN BURIAL REGISTER

Council Office
Station Road
Broughton Astley
Leicester
LE9 6PT

This form **MUST** be submitted at least 2 days
before the day of burial



Tel: 01455 285655

PLEASE ENSURE THAT **ALL** DETAILS SHOWN ON THE FORM ARE ACCURATE

1. Full name of person to be interred / ashes scattered (<i>delete as applicable</i>)		
2. Address of person to be interred / ashes scattered (<i>delete as applicable</i>)		
3. Their occupation (if a minor, name and address of parents).		
4. Their Age		
5. Date of death.		
6. Parish in which the death occurred.		
7. Place of death.		
8. Day and date on which interment / ash scattering is to take place. (<i>delete as applicable</i>).		
9. Time at which the funeral party will arrive at the burial ground.		
10. Grave/cremation plot number or area for ash scattering, (if known).		
11. Coffin / casket size if applicable.		
12. Depth of new grave 5 feet or 7 feet if applicable		
13. To be completed on purchase. Full name and address of person in whose name deed is to be drawn.		
14. If the grave in which the burial is to take place has been previously purchased the present owner should sign here, (signifying consent for such grave to be used for this interment). The Deed of Ownership must be produced or an indemnity form.		
15. Name of the Minister intended to officiate if applicable.		
16. Name of Funeral Director arranging the interment if applicable		
17. Fee paid.		
Receipt No:	Signature of Applicant:	Date:
FOR OFFICE USE ONLY		
ITEM	AMOUNT	
Grave	£	
Interment	£	
Ashes	£	