



NOTICE OF INTERMENT OF ASHES
AT
BARROW UPON TRENT CEMETERY,
TWYFORD ROAD, BARROW UPON TRENT

Burial Ref: Fee: Receipt: Date:
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Full name and title of deceased			
Age of deceased		Date of Death	
Full address at time of death		Full permanent address prior to death	
Date for the interment of the Ashes		Time at which the service will take place at the Cemetery	
Name of officiate			
Name and address of Funeral Director			
Details of the person to be registered as the owner of exclusive burial rights <i>(by signing this you agree to abide by the terms & conditions set out by the Parish Council)</i>			
Title and full Name			
Address			
Email			
Signature of the owner of exclusive burial rights			

I hereby certify that the above particulars are correct and that the family have been made aware of the terms & conditions

Informant/Funeral Director Signature _____ Date _____