

CONSENT OF THE REGISTERED OWNER – REOPENED/RESERVED GRAVE

FULL NAME

DEED OF GRANT PRODUCED YES/NO (IF NOT PRODUCED PLEASE CONTACT THE OFFICE)

ADDRESS

POSTCODE

PHONE AND EMAIL

DATE

SIGNATURE

FUNERAL DIRECTOR

NAME

ADDRESS

POSTCODE

EMAIL AND PHONE

DATE

SIGNATURE

OFFICE USE ONLY

GRAVE PURCHASE: £

PLOT NUMBER

INTERMENT: £

FOLIO NUMBER

TOTAL: £