



# ILMINSTER TOWN COUNCIL NEW ROAD CEMETERY

<b>Interment and/or Burial Rights purchase request form</b>	<b>Plot Number :</b>	
<p><b>Important Notice : No interment can proceed until:</b></p> <ul style="list-style-type: none"> <li>a. This form has been fully completed and signed by the applicant and burial rights owner where appropriate</li> <li>b. Authority has been given in writing by Ilminster Town Council</li> <li>c. The signed form, including pages 1 to 3, has been returned to you.</li> </ul>		
<b>Section 1 :Purchase of a plot</b>		
Please tick :		
<input type="checkbox"/> Purchase of <b><u>Grave</u></b> plot <input type="checkbox"/> Purchase of <b><u>Ashes</u></b> plot		
<b>Section 2 : Interment Request</b>		
<b>Details of person to be interred</b>		
Full Name :		
Date of Birth:	Date of Death:	Age at time of death :
Occupation :		
Resident Address :	Address at which death occurred :	
If the deceased resided outside of Ilminster for ten years or less immediately before their death due to care requirements please provide details of their previous resident address :	If a Minor, Name & Address of Parents/Guardian	

<b>Details of the interment</b>	
Please tick : <input type="checkbox"/> Grave <input type="checkbox"/> Ashes	
Requested Date of Interment :	Requested Time of Interment :
Coffin / casket material	Dimensions of Coffin / Casket (including handles) (length X width X depth):
For <b>reopened</b> plots : Full name and date of death of the person already interred :	
<b>Details of Person requesting interment</b>	
Full Name :	Address
Relationship to the Deceased	
Telephone Number :	
Email	
<b>Details of Funeral Directors</b>	<b>Details of Stone Mason (if appropriate)</b>
	<b>Note : This is only for authorisation to remove a memorial in order for an interment to take place.</b>
Name	Name
Address	Address
Telephone Number	
Email	
Has the Funeral Director received the Burial or Cremation Certificate Yes <input type="checkbox"/> No <input type="checkbox"/>	

**Section 3 : Authorisation and Signature(s)**

**By signing this form you have agreed that all the details provided are correct and you have read and accept all notes conditioning that an interment can proceed. You have also been made aware of and accept to pay all charges that have been incurred as per this interment request.**

**Please tick a) or b) and sign in the adjacent box**

**a)**  I/We wish to purchase the Exclusive Right of Burial

Full Name

Address

Signature .....

**Note : We require the signature of the person/persons Purchasing the Exclusive Right of Burial.**

**b)**  The plot has already been purchased  
(please contact Ilminster Town Council for confirmation of the Burial Rights Number, date of purchase and ownership)

Burial Rights Number :

Date Burial Rights Purchased :

Name and address of Burial Rights Owner :

Signature .....

Signature .....

**Note : We require the signature of the present rightful owner of the Right of Burial of the grave for which this application is submitted or the person requesting the interment of the present rightful owner of the Right of Burial.**

**If the Exclusive Right of Burial is in joint ownership we will require the signature of ALL owners.**

**By signing you are giving permission for any memorial on the grave space to be removed from Ilminster Cemetery by the authorised stone mason, if it is necessary to do so, in order for the interment to proceed.**

**Section 4 : For office use only : No interment can proceed until the Cemetery Administrator has signed to give authorisation.**

Date	Print Name	Signature
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Invoice number and account name:

**Additional notes for interments :**

Wherever possible, please provide a minimum of 3 working days' notice for any interment request. Any change notified or incomplete information may result in a delay and additional charges.

Where Exclusive Right of Burial is in place we must have the signature of the owner of the burial rights as per the Local Authorities Cemeteries Order 1977. It may be necessary to transfer the ownership of burial rights before an interment can be agreed.

Please email the completed form to [town.council@ilminster.gov.uk](mailto:town.council@ilminster.gov.uk) fax to 01460 55642 or post to Ilminster Town Council, Council Offices, North Street, Ilminster, TA19 0DG

Please do not send payment until you have received an invoice from us.

Permission must be given by Ilminster Town Council **BEFORE** any headstone is removed.

A Memorial Request Form must be submitted and approved by Ilminster Town Council **BEFORE** a memorial is installed or altered.

