

Interment Booking Form

Please complete this form using BLOCK CAPITALS and place a tick in the appropriate box.

To arrange a suitable date and time please telephone the My Fenland Team on 01354 602138.

We will need some basic information (as set out in Section 1 below) to make a provisional diary booking for you. Please have this available at the time of your call.

SECTION 1 - INITIAL BOOKING DETAILS

Cemetery:	<input type="checkbox"/> March – Eastwood <input type="checkbox"/> Wisbech – Mount Pleasant <input type="checkbox"/> Chatteris – New Road <input type="checkbox"/> Wisbech – Walsoken <input type="checkbox"/> Whittlesey <input type="checkbox"/> Wisbech St Mary	
Details of Interment:	Date: __ / __ / ____	
	Start time: __ : __ AM / PM	
	<input type="checkbox"/> Ashes	<input type="checkbox"/> Burial
Surname of Deceased:		
Undertaker:		
Applicant:	Title:	
	Full Name:	
	Address:	
	Post Code:	
	Telephone:	
	Email:	
	Relationship to Deceased:	

The above details are mandatory in securing a diary slot for an interment booking. The remainder of this form must be completed and returned to Fenland District Council to secure this booking.

Completed forms can be returned to us via email bereavement@fenland.gov.uk

Please ensure that this form reaches Fenland District Council no later than 7 days prior to the interment date.

Interment – Confirmation of Details

SECTION 2 - DETAILS OF DECEASED

Surname:		Title:	
Forename(s):			
Residence at Time of Death:			
Post Code:			
Place of Death:			
Date of Death:	Date: __ / __ / ____		
Date of Birth:	__ / __ / ____	Age at Time of Death:	
Marital Status:		Gender:	
Was the Deceased a Still-born Child?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Denomination:	

SECTION 3 - SERVICE DETAILS

Church / Chapel:	
Service Time:	Date: __ / __ / ____
	Time: __ : __ AM / PM
Minister:	

SECTION 4 - DETAILS AND POSITION OF BURIAL VESSEL

Type of Vessel:	<input type="checkbox"/> Coffin <input type="checkbox"/> Casket <input type="checkbox"/> Urn <input type="checkbox"/> Other If Other please give details:
Size of Vessel:	Width: _____ Feet _____ Inches
	Length: _____ Feet _____ Inches
Position of Vessel:	The direction of the vessel within the grave space is to be determined between the client and the undertaker. Please note that Fenland District Council has no responsibility for the placement of the vessel and will not record this within the cemetery registers.
Depth of interment (Burial plot only):	<input type="checkbox"/> 6' 0" / 1.83m (Double depth) <input type="checkbox"/> 4' 6" / 1.37m (Single depth)
Position of interment (Cremated remains plot only): Note: If cremated remains are to be interred in a burial plot please contact FDC admin.	<input type="checkbox"/> Left hand side (as you look at plot) <input type="checkbox"/> Right hand side (as you look at plot) <input type="checkbox"/> Centre of plot

Please complete **either** section 5A **or** 5B

SECTION 5A - GRAVE DETAILS – Purchase of Exclusive Right of Burial

<p>Do you wish to purchase the Exclusive Right of Burial to a new plot / plots?</p>	<p><input type="checkbox"/> Yes If yes, how many? _____</p>
<p>Designation of Areas – “Lawn” and “Traditional” Plots are designated either “Lawn” or “Traditional”. Lawn areas only permit a headstone or vase at the head of the grave space. Traditional areas allow the kerb style type of memorial. Unless otherwise requested “Lawn” type grave spaces will be allocated.</p>	<p><input type="checkbox"/> I confirm I am aware and in agreement</p>
<p>CHATTERIS ONLY – New Western Lawn (NWL) Plots are in a plinth area designed to contain ‘back to back’ memorials. Memorials within this area will either face West or East depending on location. This section of the cemetery is designated a ‘Lawn’ area and no memorial, vase, flowers or any such adornment are permitted on the grass area between the concrete memorial plinths. ‘Traditional’ areas are available upon request.</p>	<p><input type="checkbox"/> I confirm I am aware and in agreement</p>
<p>Purchaser’s Details:</p>	<p>Surname:</p> <hr/> <p>Forename(s):</p> <hr/> <p>Address:</p> <hr/> <p>Postcode:</p> <hr/> <p>Telephone No:</p> <hr/> <p>I / we, the future owner(s) of the Exclusive Right of Burial to a plot within a Fenland District Council cemetery agree to abide by the conditions outlined in the current Cemetery Regulations as provided to me by the undertaker and as shown on the Councils website at www.fenland.gov.uk/bereavement</p> <hr/> <p>Purchaser’s Signature:</p> <hr/> <p>Date:</p> <hr/>

SECTION 5B - GRAVE DETAILS – Current Owner – Opening of Grave

Plot Details:	Cemetery:	
	Section:	
	Row:	
	Plot No:	
Owner's Consent: <i>(where purchaser is not the deceased named overleaf)</i>	I / we, the owner(s) of the Exclusive Right of Burial, give my / our consent to the interment of the deceased (named in section 2) in the above plot.	
Consent must be obtained from <u>all</u> owners of the purchased grave. No interments will be allowed to proceed without the consent of all parties. Please attach additional letters of consent and submit with this form.	Owner's Signature:	
	Print Name:	
	Date:	
	Deed No:	
Is this a re-open (i.e. not the first interment in this grave)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date of last interment?	__ / __ / ____	
Name of person last interred:		
Is a transfer of ownership of the Exclusive Right of Burial required**?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
** If the owner is the deceased no future interments / memorials will be permitted without transferring the grave ownership to a living person. Transfer of ownership fees will be charged as per the Council's current fees and charges. These are available to view at www.fenland.gov.uk/bereavement		

SECTION 6 - ADDITIONAL INFORMATION / SPECIAL REQUIREMENTS

<p>Any Other Information: (E.g. Extra webbing required, Horse Drawn Carriage etc.)</p> <p>Please clearly request here if a Traditional area plot is required.</p>	
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SECTION 7- CONFIRMATION OF DETAILS

I, the named Undertaker, confirm that the details supplied above are correct and I attach a copy of the Certificate of Burial / Cremation relating to this interment.	
Undertaker's Signature:	
Print Name:	
Date:	

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