LOUTH TOWN COUNCIL

The Burial Acts 1852 to	1906 as amended b	by the Local Government Act 1972

NOTICE OF INTERMENT AT LONDON ROAD CEMETERY, LOUTH, LINCOLNSHIRE

Please complete and return to: Louth Town Clerk, Louth Town Council, Sessions House, Eastgate, Louth Lincs. LN11 9AJ Tel 01507 355895 email: clerk@louthtowncouncil.gov.uk

1 Name of Deceased					
Mr/Mrs/Ms/Miss* circle as required or indicate other First Name(s)					
Surname					
2 Last Permanent Addr	ess Postcode				
3 Occupation					
4 Age*	*If under 18 years of age, name and address of parents if different from 2 above				
5 Place of Death					
6 Date of Death					
7 Date and time of Inte	rment - please book date at Town Council office before application is made (01507) 355895				
ſ	Time Day Month Year				
8 Place of Interment re	quirements—tick which required. Details of new grave compartment/gravespace to be left blank.				
Garden of Remen	ibrance (no markers allowed)				
New Ashes Plot	Compartment Gravespace Row				
New Full Burial Pl	ot Compartment Gravespace				
Gravespaces <u>already</u> re	eserved or for <u>re-opening</u>				
IMPORTANT - Louth To	wn Council can only authorise the opening of a purchased grave with the permission of the owner or				
	In all other cases ownership must be transferred to someone who can prove that they are entitled to				
receive the ownership	rights. Please see Exclusive Rights of Burial leaflet.				
Ashes or Full Buri	al Plot previously reserved EXRT No. Compartment Gravespace				
Re-opening of As	hes or Full Burial Plot EXRT No. Compartment Gravespace				
Name of person origina	Ily interred				
Date of original interme	ent				
9. Use of Cemetery Chapel required? Yes / No					
10. Clergy officiating					
11. Funeral directors attending Yes/No					
12. Size of coffin: Leng	th Length from head to shoulders Width across shoulders				
Width across head	Width across feet Coffin type ie oak or bamboo				
Size of ashes casket					
13. Funeral Director's					
name and contact details.					

13. Details of person giving this notice:

Mr/Mrs/Ms/Miss* circle as	required or indicate other
First Name(s)	
Surname	
Address	
	Post code
Telephone Number	
Email address	
Relationship to deceased	

14. Resident of Louth

I confirm that the	dece	ased was a resident of the town of Louth	or that the deceased lived for	years in Louth
prior to moving		years ago.		

Note: The Town Council will look at each case of residency where the deceased has lived in the town for a substantial period of time before leaving. Documentation to prove residency will be required as proof (ie services invoices/ELDC tax details).

Declaration

By signing below, I certify that I am the **registered owner of the grave** or that the person to be interred is the owner of the grave. I confirm that all details entered on this form are correct. I understand that I am the only person with whom Louth Town Council will correspond with regards to memorial permissions etc. I confirm that I have received a set of the London Road Cemetery Rules and Regulations, Memorial Guidelines and that I have read and understood the Louth Town Council's Cemetery Privacy Notice. I agree that the Council may process my personal information for providing information and corresponding with me in relation to cemetery services. I understand that I have the right to request modification of the information that Louth Town Council keep on record and I have the right to withdraw my consent and request that I am removed from Louth Town Council's database.

I consent to my personal information being shared with third parties, where appropriate, in relation to the grave, for example a funeral director or memorial mason.

Signed	Date	

FOR OFFICIAL COUNCIL / CEMETERY USE ONLY

Interment Form received by			on behalf of Louth Town Council	
Total Cost £	Cheque received by MV LP Cheque Date	Amount Receipted £	Receipt No. Invoice No.	
Burial of Ashes/Body/Exhum	EX/RT No if required	Green or Crem Form	Interment No	
Index x 1 Database x 1 Burial Book x 2 Graves x 2	EX/RT is used cross ref	Other notes		