

104 Norse Road, Bedford MK41 ORL

Phone: (01234) 718150

Application to Purchase Cemetery Rights

Double Burial Chamber

| | | ING TO PURCE D BY THE COU | | YOU ARE AD | VISED TO READ THE BURIAL | | | | | |
|--|--------------------------------------|------------------------------|------------------|---------------|---|--|--|--|--|--|
| This appl | ication is to p | urchase: | | | | | | | | |
| Exclusive | Right of Burial | & First Interme | ent only. | | | | | | | |
| Right to E | rect a Memori | al. | | | | | | | | |
| Cost Resident: £5,465.60 Non Resident: £8,198.40 Additional fees to pay for re-opening chamber for second interment. | | | | | | | | | | |
| • | | | | • | call (01234) 718150, Sort Code: 60-02-13 | | | | | |
| Reservati | Reservation Only: For Immediate Use: | | | | | | | | | |
| Applica | ant's Inforn | nation | | | | | | | | |
| Name: | | | | | | | | | | |
| | Mr | Mrs | Miss | Ms | | | | | | |
| Address: | | | | | | | | | | |
| Postcode Email: | : | | | Phone: | | | | | | |
| | | | | | | | | | | |
| If require | ed for Immedia | ite Use, please | complete the fo | ollowing: | | | | | | |
| Name of | Deceased: | | | | Date of Burial: | | | | | |
| Are you t | he nearest sur | viving relative o | r executor? | YES | NO | | | | | |
| What is y | our relationshi | p to the person | last buried in t | he grave? | | | | | | |
| Burial Ch | amber Norse I | Road Cemetery | Section: | | Number: | | | | | |
| Declar | ation | | | | | | | | | |
| | g this applicati | _ | the Council's B | Burial Regula | tions will be complied with in res | | | | | |

pect of the rights granted me.

Signature: Date:



Please save the filled-in form and email to crem@bedford.gov.uk as an attachment.

| OFFICE | USE | ONLY |
|--------|-----|------|
| | | |

| Rec No: | Rec Date: | Issued by: | Fee paid | Folio Ref: | Grant No: |
|---------|-----------|------------|----------|------------|-----------|
| | | | | | |