

# APPLICATION FORM FOR CREMATED REMAINS

#### **DETAILS OF DECEASED**

Full Name:

Date of Birth and Date of Death:

Religion or Persuasion

## **APPLICANT** - OWNER OF THE PLOT

Name:

Address:

Tel. No. and email address:

### FUNERAL DIRECTOR - IF USING

Name:

Address:

Contact Name and Tel. No.

Signature of the <u>Applicant</u> (who confirms they are entitled to make the arrangements for the deceased, and agrees to the Terms and Conditions of the Burial Ground):

Signed: ..... Date: .....

It would be very helpful if you could tell us where you heard about Acorn Ridge:

Word of	Attended	Funeral	Newspaper	Internet search	Other (please give details)
mouth	funeral	Director	advert	engine	

#### ASHES – plot will be dug to approximately 45cm (L) X 35cm (W) x 60cm (D)

Date:	Time:	Request for:	Scatter / Inter
Size of	Urn	Tree type	
Urn:	Material:	required:	

Notes: Please refer to our Terms and Conditions before completing this Application Form, particularly noting that:

• Applications cannot be accepted on behalf of those who had a notifiable disease at death, or who have been treated with formaldehyde. Your Local Council will advise which burial grounds may be used.

• All coffins, caskets and urns etc. used for burial and interment must be constructed of an ecologically sound material.