

WATERINGBURY PARISH COUNCIL

Tel: 07943 937694 Email: clerk@wateringburyparish.gov.uk

FULL NAME OF DECEASED				
First Name(s)				
Middle Name(s)				
Surname				
HOME ADDRESS				
House Number				
Address Line 1				
Address Line 2				
Town				
County				
Post Code				
ADDITIONAL DETAILS				
Age Last Birthday				
Date of Death				
Place of Death				
Parish in which Death Occurred				
Plot Number				
GRAVE DETAILS				
Single or Double Depth Plot				
Is Grave to be re-opened	YES		NO	
Is Grave to be purchased	*YES		NO	
*If yes, complete Purchaser Details for Exclusive Right of Burial Certificate to be sent.				
PURCHASER DETAILS				
Full Name				
House Number				
Address Line 1				
Address Line 2				
Town				
County				
Post Code				
Signed	Dated			