

# CORFE MULLEN TOWN COUNCIL

Council Office, Towers Way, Corfe Mullen, Wimborne, Dorset, BH21 3UA.

Tel.: 01202 698600 Email: [office@corfemullen-tc.gov.uk](mailto:office@corfemullen-tc.gov.uk) Town Clerk

## Application For Works to a Memorial In Corfe Mullen Cemetery

**Part 1 TO BE COMPLETED BY THE OWNER/S OF THE EXCLUSIVE GRAVE RIGHT (see important note on final page)**

### Applicant 1

	Mr / Mrs / Miss / Ms / Master Other -
Full Name	
Address	
Home Telephone Number	
Mobile Telephone Number	
Email Address	
Grave Number	
Are you the Grave Right Owner	Yes/No
I apply for permission for the works detailed in Part 2 below to be carried out on the above grave in accordance with the Council's Cemetery Regulations, a copy of which I have received. I confirm that I have read the notes at the end of this form.	
Signed	
Date	

### Applicant 2

	Mr / Mrs / Miss / Ms / Master Other -
Full Name	
Address	
Home Telephone Number	
Mobile Telephone Number	
Email Address	
Grave Number	
Are you the Grave Right Owner	Yes/No
I apply for permission for the works detailed in Part 2 below to be carried out on the above grave in accordance with the Council's Cemetery Regulations. I confirm that I have read the notes at the end of this form.	
Signed	
Date	

*If there are more than two owners please provide details on additional sheet with signature and date.*

**Part 2 TO BE COMPLETED BY THE STONEMASON/CONTRACTOR**

Name	
Address	
Telephone Number	
Email:	
I hereby apply to carry out the work as detailed below in Part 3 accordance with the Council's Cemetery Regulations and NAMM standards.	
Signature	
Date	

**Part 3 DETAILS OF THE WORKS TO BE CARRIED OUT**

New Memorial	
Additional Inscription	
Replacement Memorial	
Other (please state)	

Size of memorial (including base)	H (mm) W (mm) D (mm)
Material to be used	

	Mr / Mrs / Miss / Ms / Master Other -
Full name of deceased	
Date of death	
Proposed inscription	
Illustration Enclosed	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Important Note:**

*The erection of, or works to, a memorial can only be carried out with the consent of the grave right owner. In the event that the grave right owner is deceased and already interred in the above mentioned grave, the memorial application may only proceed on the understanding that the transfer of the burial right is completed at the earliest convenience.*

*Two copies of this form must be submitted to the address above, together with drawings and appropriate fees. One copy will be returned with approval.*

*Full approval must be sought prior to the commencement of any works. All works including removal or maintenance in situ must be booked in advance with the Council Office.*

*A memorial must not be installed/re-installed within 12 months of the last interment (full burials only) to allow for ground settlement.*

<b>APPROVED BY:</b>		<b>DATE:</b>	
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**OFFICE USE ONLY**

Resident	<input type="checkbox"/>	<b>Entries Completed:</b>		
Non Resident	<input type="checkbox"/>			
Grave Right checked:	<input type="checkbox"/>	Epitaph	<input type="checkbox"/>	
Dimensions checked:	<input type="checkbox"/>	HG schedule	<input type="checkbox"/>	
Correct Fee paid?	Y/N	Receipt No. & Date		
Amount	£	Date of approval		
Amount o/s	£	Processed by: <i>(pls initial)</i>		