

APPLICATION FOR INTERMENT

This Application is confirmation of preliminary telephone arrangements and must be posted \ emailed to the Dunnington Parish Clerk to arrive **at least 48 hours** prior to the interment.

Proposed interment

Day.....Date.....time.....

Full name of deceased.....

Permanent address.....

.....

.....

Age..... Date of death.....

Died at.....

Resident of Dunnington Yes / No

Interment is to take place in

Grave No. row. No. of interments.....

Reopened (written permission must be sought from current grave owner)

Grave No. Plot No. Deed No.

Name of Owner \ Successor in Title

Address

Date.....

Name and address of funeral director

.....

Exact coffin size

For Official Use

Burial Register No. Order No.