



GARDEN OF REST CEMETERY

APPLICATION FOR MEMORIAL & INSCRIPTION APPROVAL

Please refer to the current policy and charges when completing this application. Full payment must be submitted with your application which will then be considered by the Council in line with the policy. Payment will not be refunded where an application is refused. No works can be carried out in respect of this application without the approval of Ketley Parish Council and the Council's decision will be notified in writing.

GRAVE NO:	GRANT NO:
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APPLICATION DETAILS:

GRAVE:	Lawn <input type="checkbox"/>	Traditional Kerbed <input type="checkbox"/>	Cremated Remains <input type="checkbox"/>
INSCRIPTION:	New <input type="checkbox"/>	Additional <input type="checkbox"/>	Photograph <input type="checkbox"/>
WALL PLAQUE:	Single <input type="checkbox"/>	Double <input type="checkbox"/>	

REGISTERED OWNER DETAILS:

NAME:	
ADDRESS:	
POSTCODE:	
EMAIL:	
LANDLINE:	MOBILE:
SIGNATURE:	DATE:

STONE MASON / FUNERAL DIRECTOR DETAILS:

COMPANY NAME:
CONTACT NAME:
ADDRESS:
POSTCODE:
EMAIL:
WEBSITE:
CONTACT NUMBER:

MEMORIAL / INSCRIPTION DETAILS:

MATERIALS:			
DIMENSIONS:	Height	Width	Depth

MEMORIAL - Please attach a copy of the proposed memorial showing dimensions with your application or insert design below:

INSCRIPTION - Please attach a copy of the proposed inscription or insert wording and photograph (where applicable) below:

KETLEY PARISH COUNCIL USE:

APPROVED:	*Yes <input type="checkbox"/>	No <input type="checkbox"/>	*With Amendments <input type="checkbox"/>
SIGNATURE:	DATE:		
NAME:	POSITION:		
PAYMENT:	RECEIPT NO:		

*All approvals are subject to the current policy in force and any amendments requested. Please note that memorials cannot be installed within six (6) months of an interment.