

Memorial Application Permit

STRENSALL WITH TOWTHORPE PARISH COUNCIL

Grave Memorial Permit (Installation, Inscription or Other Work)

I (full name) Being the

Of the late

of

confirm my entitlement to carry out work on plot23/24.... Row E. of the cremated remains section

of Strensall Cemetery as detailed below.

Place and maintain a memorial

Place and maintain a vase and plinth

*tick as applicable

Place and maintain an inscription on a memorial

Place and maintain an additional inscription on a memorial

Other work

I understand that the Exclusive Right of Burial (Grave Deed) may be required as evidence of entitlement if necessary. I also confirm that all work to be carried out will be in accordance with the Rules of the Cemetery

Signature:..... Date:

Please permit of

To carry out work as detailed below.

<p>A detailed drawing showing dimensions and type of material must be given here or attached on a separate sheet</p> <p>Ground anchor system used</p>	<p>Proposed Inscription(s) or detail of other work:</p> <p>Full name of deceased:</p>
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I confirm that the above works will be carried out in full accordance with the current versions of the BRAMM scheme, the NAMM Code of Working Practice and BS8415 and in accordance with the Strensall Cemetery Rules

Signature of Memorial Mason: Date:

<p>I certify that all work carried out on this memorial, as identified in the application, complies with the current versions of the NAMM Code of Working Practice and BS8415 . This excludes components provided by the burial authority.</p> <p>Date work to be carried out</p> <p>Signature of Mason (Authorising Officer)</p> <p>Please ensure any copies of guarantees and insurances are received in the Cemetery Office within 4 weeks of the date the work was completed, as indicated above.</p>

STRENSALL WITH TOWTHORPE PARISH COUNCIL
Grave Memorial Application (Installation, Inscription or Other Work)

(Copy for return with approval)

DUPLICATE SECTION FOR RETURN TO STONEMASON

I (full name)being the

..... of the late

of

wish to carry out work as detailed below on Row E PLOT 23/24 (Cremated remains Section)

- | | |
|--|--|
| Place and maintain a memorial | <input type="checkbox"/> |
| Place and maintain a vase and plinth | <input type="checkbox"/> *tick as applicable |
| <hr/> | |
| Place and maintain an inscription on a memorial | <input type="checkbox"/> |
| Place and maintain an additional inscription on a memorial | <input type="checkbox"/> |
| Other work | <input type="checkbox"/> |

I understand that the Exclusive Right of Burial (Grave Deed) may be required as evidence of ownership if necessary. I confirm that all work will be in accordance with the Strensall with Towthorpe Cemetery Rules

Signature:..... Date:

Please permit of

To carry out work as detailed below.

<p>A detailed drawing showing dimensions and type of material must be given here:</p> <p>(This can be provided on a separate sheet)</p> <p>Ground anchor system used</p>	<p>Proposed Inscription(s) or detail of other work:</p> <p>This can be provided on a separate sheet)</p> <p>Full name of deceased:</p> <p>.....</p>
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I confirm that the above works will be carried out in full accordance with the BRAMM Scheme , the NAMM Code of Working Practice and Rules of Strensall Cemetery

Signature of Memorial Mason: Date:

Permission is hereby granted for the above works, subject to the conditions now in force governing the erection of memorials/engraving of inscriptions in cemeteries. At least 24 hours notice must be given of the date on which it is intended to carry out the work and all works must be carried out to the satisfaction of the Authorised Officer. This permit is valid for a period of two calendar months from the date of issue.

Receipt number: Amount paid: Date:

Signature: (Authorising Officer)