

ASHFORD BOROUGH COUNCIL

APPLICATION FOR PERMISSION TO ERECT A MEMORIAL

Details of the grave:	Cemetery		Grave Number	
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Full names of deceased: (Please note we will only allow a memorial for persons in the grave)	
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Date of Interment:		Please tick if deceased is aged 16 or less	
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Application for: (please tick all that apply)	Headstone		Additional Inscription	
	Kerb		Vase	
	Tablet		Replacement	

Name of applicant	
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Address of applicant	
Tele No/email:	

I am the registered owner of the Exclusive Right of Burial in the above grave space and I hereby authorise the works detailed in this application. I confirm that there is no other person(s) who may be entitled to erect a memorial. I indemnify Ashford Borough Council against any claim arising from its reliance upon this statement. I undertake to keep the memorial in good repair and condition, responsibility for maintenance and upkeep of the memorial lies with the person entitled to exercise the memorial right.

Signed (applicant)		Date	
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Please return completed form and required payment to:
Cemeteries Officer, Ashford Borough Council, Environmental & Land Management,
Civic Centre, Tannery Lane, Ashford, Kent TN23 1PL

Ashford Borough Council is the data controller for any personal information collected in this application. Processing is being conducted relying upon a public task legal basis. Your data may be shared with other departments within the council for the purpose of improving services, keeping records up-to-date and for the protection of the public funds. For more information about your data protection rights please see the Council's data protection pages which can be found at www.ashford.gov.uk or contact the Data Protection Officer at, The Data Protection Officer, Ashford Borough Council, Civic Centre, Tannery Lane, Ashford TN23 1PL

For office use only

Permit Number:

Date of Interment		Purchasers Name		Date headstone can be erected	
Insurance received?		Fees Paid £		Receipt Number:	
Register Completed		Post book completed			

To be completed by the Stonemason:

Diagram of Memorial to be drawn below or attached on separate sheet if more space is required:

Proposed Material	
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Measurements of:

Headstone		high		wide		deep
Base		high		wide		deep
Kerb		high		wide		long

Overall height (from base to top of headstone including kerb):

Proposed inscription:	
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CONDITIONS

1. All memorials are to be erected in accordance with the Ashford Borough Council's Minimum Standards of Fixing (copies are available on request).
2. Memorials cannot be erected or re-erected before the date detailed on the memorial authorisation, which will be six months after the date of the last interment.
3. No work should commence until the application is approved.
4. No memorials are allowed on unpurchased graves.
5. The grave number **MUST** be inscribed on the side or reverse of the memorial.
6. Memorials must not exceed the dimensions detailed in the relevant Regulations.

Name of Stonemason Company

Address

..... Telephone No.

I HEREBY UNDERTAKE to erect the memorial in accordance with the Conditions detailed above and confirm that I have Public Liability Insurance* cover to a minimum of £5,000,000.

Signed Date

(stonemason)

*Proof of your cover is required before the application is approved.