



TUNBRIDGE WELLS CEMETERY



APPLICATION FOR THE PERMISSION TO INSTALL A MEMORIAL AND/OR ADDITIONAL INSCRIPTION

Details of Grave:

Class: Section: Number: Section type:

Lawn Grave Traditional Grave

Names of deceased persons interred: (BLOCK CAPITALS PLEASE)

Name of memorial mason:

Address:

Postcode

telephone no: e-mail:

Is your business BRAMM accredited?: Yes No

Are your fixers licensed? Yes No

Details of Memorial

Is this a new memorial? Yes No

Is this an added inscription? Yes No

Please specify the type of ground anchor system to be used

How long is the memorial guaranteed regarding safety and stability?

Please provide a scale drawing of the proposed memorial on the reverse of this form, stating all dimensions, the type of materials to be used, and the proposed inscription.

Applicant's authorisation

I, Telephone no:

of

being the registered owner of the exclusive right of burial in the above numbered grave space, hereby give authority to carry out the works detailed in this application and understand that the Council will accept no responsibility due to repetition of any design of memorial on graves in any ownership in the Cemetery. (Please note the right to erect a memorial will be granted for a 10 year endowment period, upon expiry the right can be renewed provided all terms and conditions are met, alternatively, the memorial could be removed.) I also agree to accept the Rules and Regulations for the management of the Cemetery made by the Tunbridge Wells Borough Council.

Signed

Dated



PERMIT FOR THE INSTALLATION OF A MEMORIAL IN THE CEMETERY

Name and address of memorial mason

are granted permission to install/carry out works to the memorial placed on grave space

in the name(s) of

Date Issued

Authorised by Registrar

Memorial drawing stating type of material used, dimensions, and drawn to a scale of half an inch to one foot.

Proposed Inscription

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