**Arnside Parish Council**

**APPLICATION FOR MEMORIAL WORK – PART ONE**

**MEMORIAL SURNAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ARNSIDE CEMETERY GRAVE NO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SECTION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I, (full name of applicant) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of (address)**

**Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Hereby make the application, for the right to (Tick one):**

|  |  |
| --- | --- |
| Place a headstone as a memorial |  |
| Place a tablet as a memorial |  |
| Add to the inscription of an existing memorial |  |
| Repair or refurbish a memorial |  |
| Remove a memorial and place an identical replacement |  |

In accordance with the particulars given on the reverse of this form, and I request that authorisation be given to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Monumental Mason) to carry out this work.

I further claim that I am the person named on the Exclusive Right of Burial\*, within Arnside Parish Council’s purchase register. \*\*

*\*Where there is more than one owner, all owners must sign on this form or on a supplementary form giving permission.*

*\*\*If the holder of Exclusive Right of Burial is deceased, it is necessary to transfer the ownership to the rightful living person. Therefore, the memorial application CANNOT be progressed, until this is completed and approval to erect will not be provided. Please seek assistance from Arnside Parish Council, to arrange transfer of ownership.*

I understand this memorial application is to be considered in accordance with the cemetery regulations of Arnside Parish Council and the right is reserved to reject any proposed memorial that contradicts such regulations.

I understand that the memorial will remain my sole responsibility and that Arnside Parish Council may take this memorial down, if it is to become a source of danger during the opening of the grave for an interment; for the excavation of an adjoining grave; due to safety concerns or neglect.

I understand that Arnside Parish Council shall not be held responsible for any injury, or damage to the memorial through any cause whatsoever, including vandalism, grave settlement or maintenance operations. You are strongly advised, to ensure your memorial is protected by a suitable insurance policy. Please speak to your chosen memorial mason for advice surrounding this.

I understand that Arnside Parish Council recommend a minimum of a 6 month ground settlement period before erecting a memorial on a plot following a full burial. Arnside Parish Council assume no responsibility over the movement of memorials or sinking of a plot, on occasions whereby the stone was placed prior to 6 months elapsing.

I have read and understood the above terms and conditions of this application for memorial works.

Signature of applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_