**Arnside Parish Council**

**STATUTORY DECLARATION (LOST DEED)**

 **PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT FOR SIGNATURE**

I (full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do solemnly and sincerely declare:

1 That I am the person entitled to exercise the Right of Burial -

2

|  |
| --- |
| Date of issue: |
| Grant Number: |
| Grave Number: |
| Section: |
| In: Cemetery |

3 That notwithstanding an exhaustive search for the Deed containing the Grant of this Right and made out in the name(s) of:

|  |  |
| --- | --- |
| Name 1 |  |
| Name 2 (if appropriate) |  |
| Name 3 (if appropriate) |  |
| Name 4 (if appropriate) |  |
| Name 5 (if appropriate) |  |

Date purchased on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ amongst all the documents in my possession or custody this Deed has not been found and I truly believe that it has been lost.

AND I make this solemn declaration conscientiously believing the same to be true, and by virtue of The Statutory Declaration Act 1835.

|  |  |
| --- | --- |
| Signed |  |
| Print Name |  |

Declared at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20 \_\_\_\_\_\_\_

 **Official Stamp**

Before me

**NB this declaration is to be made before a Solicitor/Commissioner for Oaths**

**Upon completion, please return to: The Cemetery Chapel, Silverdale Road, Arnside, Cumbria, LA5 0ER**