

**FORM C**

**THE RE-OPENING OF A PURCHASED GRAVE AND CONSENT TO BURIAL WHERE THE DEED HOLDER IS UNABLE TO SIGN**

This form, together with the certificate obtained from the Registrar/Crematorium and the appropriate fee, should be sent to the Parish Clerk at 11 Broughton Close Riddings Alfreton Derbyshire DE55 4DQ at least **TWO working days\*** prior to the day of the funeral.

\*Please note it may be necessary to postpone the interment due to late submission of documentation and fees.

**SHIRLAND CEMETERY**

**GRAVE NO.** \_\_\_\_\_

I (\*1\*) \_\_\_\_\_  
of

(\*2\*) \_\_\_\_\_ PostCode \_\_\_\_\_

do solemnly and sincerely declare that the Deed to the Exclusive Right of Burial in the grave was granted to (\*3\*) .....

2 That said (\*3\*) ..... died on

the (\*4\*) ..... (day) of ..... (month) ..... (year)

(I) Leaving a last Will and testament dated (\*5\*) .....  
which was not revoked in which I/we were appointed as Executor(s)

(ii) Leaving a Will dated (\*5\*) ..... which did not appoint  
Executors/ appointing Executors who have not taken up or who are incapable of taking up the  
appointment.

(iii) Not having left a valid Will and Testament.

(iv) I have been granted probate of the said (\*3\*) .....  
estate.

(v) I have had ownership of the Right of Burial transferred to me following the administration of the said  
(\*3\*) ..... estate and now produce the transfer Deed.

3. The said (\*3\*) .....left an estate of insufficient value for which it  
was required to apply for probate and I am the (\*6\*) ..... and next-of-kin  
and  
therefore would be entitled to such grant of probate had it been necessary.

4. To the best of my knowledge and belief the Deed relating to the Exclusive Right of Burial has not been sold or  
transferred to any person.

5. I declare (\*7\*) .....to be the new rightful owner of the Exclusive Right of Burial.  
Address if different from above.....

I hereby indemnify Shirland & Higham Parish Council and all its Officers and Members against any claim whatsoever  
relating to the grave, its ownership, or the Exclusive Right of Burial therein.

I make this declaration conscientiously believing the same to be true and by virtue of the provisions of the Statutory  
Declarations Act 1935.

Signature of Declarant .....

Declared at .....in the County of .....

this ..... day of .....

before me ..... Signature .....

Address of Solicitor/Commissioner for Oaths .....

Delete such parts above as appropriate

(*1*)	Full name of the Applicant	(*2*)	Full postal Address of the Applicant
(*3*)	Full name of Owner of the Exclusive Right of Burial	(*4*)	Date of death
(*5*)	Date of Will	(*6*)	Relationship to the original owner
(*7*)	Name of the new owner of the Exclusive Right of Burial		

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**FORM C**

**NOTICE OF INTERMENT**

PARTICULARS OF DECEASED

SURNAME \_\_\_\_\_ AGE AT DEATH \_\_\_\_\_

FORENAMES \_\_\_\_\_

LAST ADDRESS \_\_\_\_\_

DATE OF DEATH \_\_\_\_\_

PLACE OF DEATH \_\_\_\_\_

DATE OF BURIAL \_\_\_\_\_ TIME \_\_\_\_\_

GRAVE REQUIREMENTS Re-open Grave/Re-open Ashes (Delete as appropriate)

Grave number \_\_\_\_\_

Coffin/casket (delete as appropriate) Coffin Size \_\_\_\_\_

FUNERAL DIRECTOR \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

To be completed by the Applicant:

I hereby certify that the above particulars are correct and I abide by the cemetery rules and regulations as laid down by Shirland and Higham Parish Council, and any subsequent revisions.

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_

**Notes to Funeral Directors**

*A person who has lived at anytime during their life for 10 years or more in the Parish will be considered a 'Parish Resident' for the purpose of burial fee calculations.(proof of residency may be required)*

The approved Grave Digger for Shirland Cemetery is: -

Mr Adam Wilkins of LA Landscaping

For Office Use: -

Date rec'd \_\_\_\_\_ Fee \_\_\_\_\_ Date Receipt Sent \_\_\_\_\_

Burial Register No. \_\_\_\_\_ Grant No \_\_\_\_\_

Grave Register No \_\_\_\_\_ Date Part C Returned to Registrar \_\_\_\_\_