

Bereavement Services

The Chapel Office
 Skipton Crematorium
 Carleton Road
 Skipton
 North Yorkshire, BD23 3BT
 Telephone: 01756 796118

Bereavementservices@cravenc.gov.uk

www.cravenc.gov.uk/bereavement



AIREDALE MEMORIAL APPLICATION FORM

Details of person to be registered as the owner:

Full Name:			
Address:			
	Post Code:		
Email Address:		Telephone No:	

Position Reference – Section T	Number:
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Each plot can accommodate at maximum of two sets of cremated remains

Do family wish to be present when interring the ashes: <i>A separate Interment Notice must be completed</i>	Yes	No	Not Applicable
Do family wish to be present whilst placing the memorial:	Yes	No	

Exclusive rights of burial are for 30 years.

The memorial plaque is the property of the purchaser who may collect the plaque (but not the base) after the expiry period, OR when the plaque has been adjusted to accommodate a second inscription.

The Exclusive Rights of burial are renewable after 30 years.

Position Reference – Section T	Number:	Number to be inserted on bottom left of the plaque
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INSCRIPTION

Please complete your required inscription in the boxes provided below. Each box represents one letter of the inscription (include a blank box for each space). All inscriptions will be centred, unless you state otherwise.

The council reserves the right to refuse or alter any inscription considered unsuitable.

Please allow up to 6 weeks for completion

Line 1																			
Line 2																			
Line 3																			
Line 4																			
Line 5																			
Line 6																			
Line 7																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19

LETTERING

Circle as appropriate

Please choose one of the following “colours” for your memorial lettering:

GOLD	SILVER
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Please choose one of the following “font types” for your memorial:

D1	In Loving Memory IN LOVING MEMORY
D2	In Loving Memory IN LOVING MEMORY
D3	In Loving Memory IN LOVING MEMORY
D4	<i>In Loving Memory IN LOVING MEMORY</i>

Emblem

Placed in the top left hand corner unless otherwise stated.

If you would like an emblem on your memorial, please circle the appropriate one.



Praying Hands



Bird



Squirrel



Butterfly



Tree



Ancor



Clover



Music



Teddy



Ball



M/Bike



Holly



Angel 1



Angel 2



Praying 1



Praying 2



Cherub 1



Cherub 2



Dove



Dove & Hand



Rose & Cross



Cross 1



Cross 2



Scroll



Ivy



Daffodil



Thistle



Forget me not



Heart 1



Heart 2



Rose 1



Rose 2

Important Information For Owners Of Exclusive Rights of Burial

Inscriptions

An additional inscription may be added at any time within the lease period and this would be in the form of a replacement plaque. The original plaque will become yours to keep.

The Council reserve the right to refuse or alter any inscription considered unsuitable.

Grounds Maintenance

The grounds maintenance staff are contracted and cannot accept complaints or advise you about our services.

In order to keep the grounds neat and tidy, to aid grounds maintenance and for Health and Safety concerns, the area surrounding these memorials should be left clear of glass containers, plastic surrounds and any such articles. The Cemetery staff will remove any articles that are deemed unsuitable. For any further advice please do not hesitate to contact the office.

Restriction of Exclusive Rights of Burial

You have the right to decide who will be buried in this grave and any memorial placed upon it. However these rights do not make you the land owner and therefore permission should be sought before you can do anything to the grave.

Insurance

Although the risk of damage to your memorial is low, it is recommended that you take out an insurance policy to cover any eventualities such as theft of, or damage to your memorial, as the Council are not responsible for your memorial.

Signed Applicant:	Date:
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Please make cheques payable to “**CRAVEN DISTRICT COUNCIL**”

OFFICE USE		
Purchase of Exclusive Rights	£	
Lease of Memorial	£	
Inscription including Right to Erect	£	
Interment of Ashes – if applicable <i>Separate Interment Notice needed</i>	£	
TOTAL DUE:		£
Date Paid:	Receipt Number:	
BACAS ID Number:	Date Entered on BACAS:	
Grave Deeds Issued:	Plan updated:	
Additional Information:		

Date ordered with Memorial Mason:	
Order Number:	
Date Plaque Received:	
Date arranged for plaque placement / Interment of Ashes:	