

APPLICATION TO ERECT A MEMORIAL

Please complete all 6 sections and return to the address above with appropriate fee

Section 1: Details of Grave		
Grave Number:	Section:	Deed of Grant Number:

Barkby Road Cemetery

Syston and District Cemetery

Section 2: Details of Memorial Mason (to be completed and signed* by memorial mason carrying out work)	
Name of Memorial Mason:	
Address including postcode:	
Telephone:	Email:
NAMM/BRAMM Registration Number:	*Signature of Mason:

*I have been instructed to carry out the memorial work, a full description, including materials, dimension, inscriptions, and fixing methods, is submitted with this form: the applicant has seen and approved these. All work I complete will be in accordance with the Cemetery Regulations and meet with the current NAMM's Code of Working Practice and comply with BS8415 for installation.

- I agree to be responsible and pay for any damage to Cemetery property or to surrounding memorial turf etc., caused by negligence of myself, my workmen and/or any subcontractor employed by me
- I have public liability insurance to the value of £5,000,000
- I agree to remove all unused materials/rubbish and leave the areas in a neat and tidy state
- I will not work while a funeral is in progress

Section 3: Details of Applicant:	Relationship of the Deceased:
Full name of applicant:	
Address including postcode:	
Telephone:	Email:

Section 4: Declaration by Applicant (please tick as appropriate):
<p>A. I AM the registered owner of the Exclusive Right of Burial as recorded on the Deed of Grant and hereby apply for a memorial permit to be issued subject to the Rules and Regulations of Syston Town Council [<input type="checkbox"/>]</p> <p>B. I AM NOT the registered owner of the Exclusive Right of Burial as recorded on the Deed of Grant. I am a relative of the person buried in the grave but it is impractical for me to trace the rightful owner and I hereby apply for a memorial permit to be issued to place and maintain, or add an inscription on a memorial on the grave. I further declare that should the rightful owner be traced I agree to remove the memorial at my own expense if requested [<input type="checkbox"/>]</p>

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I understand that I am responsible for the maintenance of the memorial and that Syston Town Council may take action they deem necessary should the memorial become unsafe or dilapidated. I also understand that the memorial may be removed temporarily to allow burials in adjacent graves to this grave.

Signature:	Date:
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Work must not commence until approval has been granted by Syston Town Council

Section 5: Details of Memorial Works	
Memorial Permit Type (Please tick as appropriate):	
New Headstone (full burial plot) [<input type="checkbox"/>]	New Headstone (Family Cremation Plot) [<input type="checkbox"/>]
New Stone Vase/Tablet [<input type="checkbox"/>]	Existing Memorial (modification or inscription) [<input type="checkbox"/>]

Approved Dimensions:

A) A flat stone occupying a superficial area not exceeding 8 feet by 4 feet	£91.00
B) A headstone not exceeding 3 feet 9 inches in height (adult) or 2 feet by 3 inches (child)	£91.00
C) A footstone not exceeding 2 feet in height	£91.00
D) A base that must not exceed 4 feet by 1 foot 6 inches	
E) A monument in the form of a vase or tablet (allowed on cremation plots) should not exceed 12 inches by 12 inches by 10 inches	£64.00
F) Kerbset to be 4 feet high, x 3 feet wide x 7 feet long Foundation/landings to be 3 feet 2 inches x 7 feet 2 inches	£116.00

NB. The exact dimensions of the proposed memorial must be given in every case. You must specify the dimension in relation to the drawing of the memorial and include your method of fixing. If necessary, you may supply the information on a separate sheet and attach it to this application.

Section 6: Design of Memorial	
Memorial Drawing and Dimensions	Inscription

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