DISS TOWN COUNCIL

Diss Town Council, 11-12
Market Hill, Diss, IP22 4JZ
Email:
towncouncil@diss.gov.uk
Tel: 01379 643848

This notice must be delivered together with the certificate for disposal or cremation certificate to the address above

APPLICATION FOR INTERMENT & PURCHASE OF EXCLUSIVE RIGHT OF BURIAL (1st interment only) - DISS CEMETERY	**APPLICATION/ REGISTER NO:**
Interment in: Main Cemetery ☐ Garden of Remembrance / Rest ☐ (please tick)	

DECEASED

Full Name:.....

Address at time of death (or previous 6 months):

.....

.....

Post Code:..... Age:..... Occupation:.....

*Residents in a retirement home outside Diss will be treated as inhabitants if they are listed on the Register of Electors within the last four years.**

Please state the previous address (if relevant):

……..

……

INTERMENT

Date of Interment:	Time of Interment: Time of Service:
Name of Minister & Denomination:	Place of Service:
Cemetery Chapel YES/NO* Organ YES/NO*	Extra Chairs YES/NO If YES How Many ……

GRAVE DETAILS

New Single Depth: ❒ Ashes ❒ New Double Depth: ❒	Consecrated: ❒ Un-Consecrated: ❒
Re-open ❒	Reservation ❒ Plot No. ……
Grave of: ……(name)	Exclusive Rights No ……
Date of 1st Interment ……	

FUNERAL DIRECTOR

Name: …….. Address:……
……
Telephone: …… Email……

Please ensure that the person arranging the funeral signs the form in the relevant section on page 3.

GDPR Privacy Notice - Diss Town Council takes your privacy seriously and will only use your information in relation to your application. For further information, please refer to our GDPR Policy at www.diss.gov.uk.

OFFICE USE ONLY – DETAILS & FEES

Section/Plot Allocated:	**Exclusive Rights No:**	**Folio/Page No:**

Interment Fee & Chapel Fee	£	Signed ……..…….. (Diss Town Council)
Exclusive Right of Burial Fee	£	Note to Minister Printed ☐
Private Ashes Interment - Digging Fee	£	DTC Order Number: DTC
TOTAL	£	Map of grave space with orientation details enclosed ☐

ADDITIONAL DETAILS

NEW GRAVES – EXCLUSIVE RIGHT OF BURIAL DEED (ERB) PURCHASE (MAIN CEMETERY)

Print Full Name(s) of Purchaser(s):
……

Address:
……

……

Signed: ……**Date**: ……..

Phone Number: …… **Email Address:**……

1. The person(s) named above will be registered as the grave owner(s) with the ERB deed being made in his/her/their name(s).
2. No memorial may be arranged, and no further interment may take place without the signed consent of the grave owner(s).
3. Exclusive Right of Burial is granted for a period of 100 years dating from the first burial.
4. For full details of Diss Town Councils Cemetery Regulations including acceptable memorials, see the link below:
   https://www.diss.gov.uk/_files/ugd/39e873_88ae811b17c6400db90abd2b3075360f.pdf
5. By signing this form below the Exclusive Right of Burial owner agrees to these conditions

PREVIOUSLY PURCHASED GRAVES – MAIN CEMETERY

The Registered Owner(s) of the Exclusive Right of Burial must give permission for the burial by signing below. If the owner is deceased, the person arranging the funeral should complete this section. Please contact Diss Town Council for any queries regarding transferring ownership of an Exclusive Right of Burial.

I consent to grave number……..……..

being opened for burial of the late…….....

Signed: …… Name: ……

Date: ……..……..

ASHES IN THE GARDEN OF REMEMBRANCE/REST & FULL BURIALS WHERE ERB IS NOT PURCHASED

The person applying for the burial must complete this section.

Full Name(s): ……..…….

Address: ……

……Signed: ……

Date: …….....