Please note each living member listed on the Right to Burial must sign this form.

**Full Name of Applicant(s)**

**Address**

**Is the person on whose behalf the memorial is to be erected** **the person granted the Exclusive Right to Erect a Memorial?** Yes / No

If not, the person granted the Exclusive Right to Erect a Memorial in the grave space then the declaration must be signed overleaf.

**Full name of deceased**

**Plot location**

**Description of proposed memorial materials.**

Types and styles of monuments are prescribed n Langton Matravers Parish Council’s Cemetery Rules and Regulations

**Stonemason Contact Details**

**Company Name**

**Address**

**Phone Number:**

**DECLARATION to be signed by person granted the Exclusive Right to Place a Memorial in the grave space or his/her assigns or heirs.**

I, (Full Name) The (\*assignee of the/heir of the) person granted the Exclusive Right to Place a Memorial in perpetuity in the grave space referred to overleaf hereby agree to this application being made and to the erection on the grave space referred to overleaf of the Memorial described in this application.

**Signature of Applicant**

**Date**

No monument may be erected without the permission of Langton Matravers Parish Council. Any memorial erected without permission will be removed. A copy of the memorial stone design must be sent to the clerk for approval.

Please see Fees document for any fees due.

Completed form should be send to the Parish Clerk at the address below.

For full details on how the Parish Council will process any personnel data, please refer to the published Privacy notice.

**To be completed by the Stone mason and returned to the Clerk.**

**Stonemason Contact Details**

**Company Name**

**Address**

**Phone Number:**

**Full name of deceased**

**Plot location**

**Design of Memorial (give outside dimensions and show drawing)**

Types and styles of monuments are prescribed n Langton Matravers Parish Council’s Cemetery Rules and Regulations