## **LARGES LANE CEMETERY**

## **Grave Memorial Application Form**







of		
being the only person entitled to the exclusive right of buria	•	
in Larges Lane Cemetery seek permission to o	carry out work as detailed below:	
Signature: Date:	Mobile No:	
Place and maintain a headstone not exceeding one metre i	in height, including inscription	
Place and maintain a vase and plinth OR tablet not exceeding 30cm in height, length or width		
including inscription (Chapel / burial ground only, not pern		
Place flat stone on cremation plot measuring 45cm x 45cm including inscription (Crem path only)		
Place and maintain an inscription on a memorial  Place and maintain an additional inscription on an existing memorial / flat stone		
Other work (please specify)		
Bank Details for payment Account Name Bracknell Town Co	ouncil	
Account Number 00033128 Sort Code 30-91-11	ouncii	
Account Number 00033128 Soft Code 30-31-11		
At least 24 hours' notice must be given of the date on wh	ich it is intended to carry out the work;	
Please ring the Cemetery Manager	on 07918 638521	
On the aforementioned grave space / vault I understand that the Exclevidence of ownership if necessary.	usive Right of Burial (Grave Deed) may be requi	red as
Please permit of		
To carry out work as detailed below.		
To carry out work as detailed below.  ailed drawing showing dimensions and type of material must be given here:	Proposed Inscription(s) or detail of other work	«:
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ailed drawing showing dimensions and type of material must be given here:  may be provided overleaf)	(This may be provided overleaf)  Full name of deceased:	K:
rials used:	(This may be provided overleaf)  Full name of deceased:	K:
illed drawing showing dimensions and type of material must be given here:  may be provided overleaf)  itals used:  I confirm that the above works will be carried out in full accordance with  Signature of Memorial Mason:  Date:	(This may be provided overleaf)  Full name of deceased:	raving of works mu
illed drawing showing dimensions and type of material must be given here:  may be provided overleaf)  ials used:  I confirm that the above works will be carried out in full accordance with  Signature of Memorial Mason:  Date:  ission is hereby granted for the above works, subject to the conditions now ptions in cemeteries. At least 24 hours notice must be given of the date on rried out to the satisfaction of the Authorised Officer. This permit is valid for	the NAMM Code of Working Practice.  in force governing the erection of memorials/engry which it is intended to carry out the work and all vor a period of two calendar months from the date of the control of the contro	raving of works mu
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THIS APPLICATION MUST BE COMPLETED IN FULL & FORWARDED WITH PAYMENT TO BRACKNELL TOWN COUNCIL, BROOKE HOUSE, 54 HIGH STREET, BRACKNELL BERKSHIRE RG12 1LL TEL: 01344 420079

A detailed drawing showing dimensions and type of material must be given here:	Proposed Inscription(s) or detail of other work: