



Plot No:  
Receipt No:  
Burial entry No:  
Burial Rights No:  
*For office use only*

## FOUR MARKS PARISH COUNCIL

### APPLICATION FOR INTERMENT IN FOUR MARKS BURIAL GROUND

This application to be delivered to the Clerk of Four Marks Parish Council  
At least two clear days before any interment

1. First name and surname  
of person to be buried .....
2. Place of residence on death .....
3. Age of person at death .....
4. Date of death .....
5. Parish in which death occurred .....
6. Date and approx. time on which burial is requested .....
7. Name of Minister (if any) .....
8. Grave and Burial Rights Number (if known) .....
- or if grave to be purchased,  
Name and address of purchaser .....
- .....
9. Fee enclosed  
(cheques payable to Four Marks Parish Council  
Bank Account No. 20400350 Sort Code: 60-83-01) .....

I confirm that the applicants have been fully informed of the Regulations (revised September 2015) in force for graves and memorials at Four Marks Burial Ground

Date ..... Signed on behalf of .....