

EASTERTON PARISH COUNCIL

Parish Clerk- Mrs SJ Bullock - clerk@eastertonpc.org.uk – 07437 857501

APPLICATION FOR HEADSTONE OR ADDITIONAL INSCRIPTION

| Please ensure that all details are recorded accurately | |
|---|-----------------------------|
| Full name of person of applicant: | |
| Address of applicant: | |
| Plot & Section number: | |
| Cemetery or Churchyard (cremated remains area): | |
| Type of Memorail: | |
| Measurements: Tablet no larger than 18"x18" in cremated remain area. Headstone | no taller 26" in comotory |
| Material to be used: | no taller 50 ill centetery. |
| Surface finish: | |
| Wording of inscription: | |
| A full sketch of the memorial must be attached. Fee paid: | |
| Applicant signature: | Date: |
| Stone mason signature: | Date: |
| Approved by Easterton Parish Council: | Date: |