

Crewkerne & West Crewkerne Joint Burial Committee

Peter Davidson: Clerk to the Committee
Town Hall, Market Square, Crewkerne, TA18 7LN

Notice of Interment: Scattering of Ashes

This Notice is to be delivered to the above address at least TWO DAYS prior to any interment.

Particulars of the person who's ashes are to be scattered

Full name

Address including postcode

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Profession or trade (if retired, profession before retirement.)

Age

Date of death Day.....Month.....Year.....

Place where death occurred

Details of scattering of ashes

Date and Time

Name of minister intended to officiate.

Use of a cemetery chapel required?

New or Old Section

Full name & address of Executor

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Signature of Applicant.....

Date.....

For Office use:

Fee Paid Receipt No

Cheques should be made payable to: **Crewkerne & West Crewkerne Joint Burial Committee**
Bank Details: **Account Number 29448460 Sort Code 30-92-40**