



**MEMORIAL APPLICATION FORM**

This application is to be completed and signed by the Owner(s) of the Grant of the Exclusive Rights of Burial and the Memorial Mason for every kind of work proposed to be carried out in relation with a memorial at any of the Cemeteries owned by Bridgwater Town Council.

Please note this form constitutes an application only and no works should be undertaken until written permission is granted by Bridgwater Town Council who will not be responsible for any costs incurred for works to a memorial that was not approved.

**Section 1: Grant owner(s) to complete**

<b>Name of deceased</b>	
<b>Date of Burial</b>	
<b>Name of Cemetery</b>	
<b>Grave Number</b>	

**Applicant(s) Details:**

<b>Applicant 1: Name</b>	<b>Applicant 2: Name</b>
<b>Address</b>	<b>Address</b>
<b>Tel no/email</b>	<b>Tel no/email</b>
<b>Applicant 3: Name</b>	<b>Applicant 4: Name</b>
<b>Address</b>	<b>Address</b>
<b>Tel no/email</b>	<b>Tel no/Email</b>

*Please tick the relevant box below*

<b>Registered owner(s) of the Grant of Exclusive Right of burial (named on the deed of grant)</b>	<b>Yes</b> <input type="checkbox"/>
	<b>No</b> <input type="checkbox"/>

**Please provide Exclusive Right of Burial Number:**

**Please contact Bridgwater Town Council.**

**Please see notes for Memorial Mason's overleaf.**

<ul style="list-style-type: none"> <li>I/we understand that I/we am responsible for the costs of erecting and maintaining the memorial</li> <li>I/we understand that the memorial remains my property and as the registered owner(s) of the Grant of Exclusive Right of Burial I am responsible for keeping the memorial in good repair at all times to meet with current and any future Health and Safety regulations that may be applied.</li> <li>If the memorial is found to be in an unsafe condition, at any time, I/we accept that the memorial will be laid flat/removed and that I/we will be responsible for the cost of removal and renovation/repair cost if I choose to have the memorial reinstated. I/we will ensure that I/we notify Cemetery Services at Bridgwater Town Council of any change of address to enable them to notify me of any change in rules or regulations that may affect the grave or memorial.</li> <li><b>PLEASE NOTE: Any kerbing or items not approved by Bridgwater Town Council will be removed.</b></li> </ul>	
<b>Signed</b>	
<b>Date</b>	
<b>Daytime Telephone Number</b>	

**Section 2**

**To be completed by the Memorial Mason who will be carrying out work of any kind, on a memorial, or erecting a memorial in cemeteries owned by Bridgwater Town Council.**






**Description of work:** Please tick box as appropriate and provide details

<input type="checkbox"/>	Erection of memorial
<input type="checkbox"/>	Additional inscription
<input type="checkbox"/>	Replacement memorial
<input type="checkbox"/>	Repair work (including cleaning/letter painting)

**Memorial:**

**Note: All memorial masons must be registered with BRAMM or NAMM. All memorials must be fitted to BS 8415, if over 2ft in height must have an anchor and a \* etched on memorial, the grave number and name of mason etched on memorial. Memorials must not exceed the dimensions in the relevant Regulations. ANY MEMORIAL NOT APPROVED BY THE COUNCIL WILL BE REMOVED.**

**Type of memorial:**

				
headstone <input type="checkbox"/>	Traditional <input type="checkbox"/>	Desktop/flat Tablet <input type="checkbox"/>	Vase <input type="checkbox"/>	Monolith <input type="checkbox"/>

<b>Type and colour of stone:</b> <b>Details of fittings</b>	
<b>Type of decorative features if any:</b> e.g. painting, photograph. Ceramic posy	Please note that these features are at the deed owners' risk
<b>Size:</b> Please give full dimensions of proposed memorial	
<b>Proposed inscription:</b> Please use Additional paper if necessary	

I enclosed a sketch/photograph – please note a sketch/photograph of the memorial must be attached to this application showing all relevant measurements.

**I/we confirm that**

- The memorial will be manufactured and erected to the current minimum BRAMM/NAMM standards and headstones will include an approved anchor system
- I/we agree to be responsible for any damage caused to Council property or to surrounding memorials, tuft etc. caused by the negligence of myself, my team and or/any subcontractor employed by me.
- I/we agree to remove all unused materials/rubbish and to leave the area in a neat and tidy state
- I/we have explained to the registered owner of the Grant of Exclusive Right of burial of the grave space that the memorial remains their property and that they are responsible for keeping it in a good and safe condition to current industry and general Health and safety standards at all times
- I/we have advised the owner to consider insuring the memorial against accidental damage and vandalism

Signed	Date
Name and address of company	