

Minehead Town Council



APPLICATION TO ERECT A MEMORIAL			
Full name of deceased			
Permanent address at time of death			
Grave Space Number		Exclusive Right of Burial Number	
Garden of Rest	Row	Plot	Exclusive Right of Burial Number
Description of Memorial & Materials			
Dimensions			
Wording of Inscription			
Additional Inscription			
Name of Applicant			

No memorial is to be removed from the cemetery without prior notice being given

APPLICATION	
On behalf of the applicant, I apply for the Council's approval to the erection of a memorial as described above and I agree to comply with the Council's requirements	
Signature of Monumental Mason	
Address	
Date of Application	
Fee Enclosed	£
Please enclose a Cheque made payable to "Minehead Town Council" in respect of fee. Send the completed form and cheque to: The Town Clerk, Minehead Town Council, Council Offices, 3 Summerland Road, Minehead TA24 5BP	

MINEHEAD TOWN COUNCIL	
Date Received	Minehead Town Council, Council Offices, 3 Summerland Road, Minehead, TA24 5BP
Receipt Number	
Memorials Plan	
Memorials Book	
Date Approved	