



TRIM Reference: _____

APPLICATION FOR THE TRANSFER OF A GRANT OF RIGHT OF BURIAL

Applicant's

Name: _____

Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

Grave Details: Plot: _____ Row: _____ Number: _____

Name of Grant
Holder: *Prior to Expiry* _____

DECLARATION

I hereby certify that as the Applicant for this renewal of the Grant of Right of Burial:

- I am the person in whose name the Grant was issued.
- I am the nominated by the original Grantee. *See below*
- I am the person authorised by the estate of the previous Grant holder to renew the Grant for this grave. *Evidence required*
- I am the person authorised by the Next of Kin to renew this Grant. *See below*

PLEASE NOTE

If the original Grantee is not applying, this document is to be accompanied by a Statutory Declaration addressing the following points:

- The reason the original grantee is not applying. (If the original grantee is alive, written consent must be given for renewal in another name).
- The relationship of the applicant to the original grantee.
- Certification that no other person with equal or greater interest in this grave will object to the renewal of the grant in the applicant's name.
- Indemnifying the Council against any litigation relating to this renewal.

Signature of Applicant

Date: _____

Approved by Manager

Date: _____

