

APPLICATION FOR A GRANITE PLAQUE ON A TREE MEMORIAL

This is an interactive PDF form which you can electronically type into the fields or print to fill out manually.

To be completed by the Applicant and returned to Bereavement Services, Crematorium Office, Westfaling Street, Hereford HR4 0JE Tel: 01432 383200.

(Please tick where appropriate)	**Plaque & Vase	Plaque Only
Memorial Tree (please telephone to discuss location and variety available)		
(NAME OF TREE VARIETY CHOSEN AND TREE REF NO.)		

(Requests to inter cremated remains underneath the tree will be declined)

New granite memorial plaques, 6" x 4" with grey lettering, are placed for an initial 10-year period. The lease is available for renewal at any time.

Granite plaques are ordered on an individual basis and take approximately 6 – 8 weeks.

The lease will commence on the day the plaque has been sited.

**** TO ORDER A GRANITE VASE – PLEASE COMPLETE A SEPARATE FORM – ALSO SEE PRICE LIST**

NO MORE than **ONE LETTER** or **NUMBER** must be written in each box
DO NOT FORGET TO INCLUDE SPACES IN YOUR INSCRIPTION. A space counts as a letter or number.

We will centre the text on the tablet; this guide box is only to aid your choice of inscription.
 The inscription **MUST** be clearly written in block capitals.

If you would like a motif, please give details of the motif required, including colouring and please contact Bereavement Services for the additional cost of this motif

If a motif is required, please do not use the lightly shaded area

1																			
2																			
3																			
4																			
5																			
6																			

HEREFORDSHIRE COUNCIL reserve the right to vary any inscriptions as may be found necessary or to refuse an application which is considered unsuitable.

Plaques need be re-made to add a further inscription. Please tick where appropriate.

This application is for a replacement plaque Plaque number, if known:

I wish to retain the original plaque I will collect Telephone No:

Herefordshire Council may recycle the original plaque Please post (P&P applies)

I enclose a payment of £ (Cheques payable to Herefordshire Council)
(Cash and Card payments are also accepted)

I confirm the inscription is correct and that the memorial plaque will be placed for an initial 10-year period. The obligations of the Council under this lease do not extend to the repair, renewal or replacement of any plaque unless the need for such repair, renewal or replacement is due to the negligence of the Council, its employees, contractors or other persons under the Council's control. Memorial trees remain the property of Bereavement Services

Date **Signature**

HEREFORDSHIRE COUNCIL reserve the right to vary any inscriptions as may be found necessary or to refuse an application which is considered unsuitable.

Applicant name and address (please print)

Please print: Mr Mrs Miss Ms

Address

Postcode

Tel. No:

E-Mail Address:

Please notify Bereavement Services of any changes to these details

On completing this form, please return it to:

HEREFORDSHIRE COUNCIL
Bereavement Services
Crematorium Office
Westfaling Street
HEREFORD
HR4 0JE

Email: bereavement@herefordshire.gov.uk Tel: 01432 383200

Herefordshire Council is the Data Controller under data protection law and will use the information you provide on this form in order to process your application. The legal basis for processing this data is our legal obligations for providing bereavement services. We will keep your data in accordance with our Record Retention Schedule. Where necessary we may share this personal data with partner organisations for the protection of public funds administered which may include the prevention or detection of fraud and auditing purposes. Individuals have a number of rights under data protection law, including the right to request their information. You also have a right to make a complaint about our handling of your personal data to the Information Commissioner's Office <https://ico.org.uk/>

For Office Use	Cremation No:	Lease Dates:
EBS 018/16	Invoice No: Receipt No:	Location:
25/09/2019	Date Ordered:	Fix Sheet No:
Credit/Debit payment:	Order No:	Removal Sheet No:
Cash payment:	Additional Lease Years:	Fix Letter Sent:
A/C to Funeral Director:	Cheque No:	Scanned: