

Market Deeping Town Council
Town Hall
Market Place
Market Deeping
PE6 8EA



Telephone: 01778 343170
Email: mdtc.townclerk@btconnect.com
Web: <http://parishes.lincolnshire.gov.uk/marketdeeping/>



Town Clerk: Mrs S Lydford

Market Deeping Cemetery – Request for Burial

Name of deceased:

Address:

Date of death: Died At:

Age: Marital Status: Religion: Occupation:

Burial or Interment of Cremated Remains:

Date of funeral: Time: Place:

Date of Interment: Time: Place:

Has a space in the Cemetery been previously reserved? Yes No

If yes, please give Exclusive Rights Grant Number, Plot number, & name, address and contact details of the Grant Holder: Exclusive Rights Grant No: Plot No:
Name:

Address:

Telephone No:

E-mail Address:

If no, what type of plot is required? Burial plot: Cremation plot:

Is an adjoining space to be reserved? Burial plot: Cremation plot:

Please give the name, address, and contact details of person who will hold the Exclusive Rights Grant: Name:
Address:

Telephone No.:

E-mail address:

Please give the name, address, and contact details of the Next of Kin: Name:
Address:

Telephone No.:

E-mail address:

Undertaker details: Name:
Address:
Telephone No.:
E-mail address:

Grave Digger details: Name:
Address:
Telephone No.:
E-mail address:

Minister details: Name:
Address:
Telephone No.:

Coffin or Casket size:

Fee enclosed: £..... Cash/Cheque

Please note that payment and all documentation must be received before the burial takes place

Conditions of Burial - Important Notice

Market Deeping cemetery is a **LAWNED CEMETERY ONLY**. Please note that the planting of graves is prohibited. The Town Council reserves the right, without notice, to remove all plants, shrubs, bushes and trees etc. from graves and re-turf. A section of the Cemetery has been made available for a Rose Memorial garden. Further details can be obtained from the Town Clerk, Council Office, Town Hall, Market Place, Market Deeping PE6 8EA telephone no: 01778 343170.

The Person instructing the Undertakers to make the funeral arrangements must complete and sign this section of the form to show acceptance of the Conditions of Burial.

Signed: Date:
Name:
Address:

Market Deeping Town Council Office Records only

:
Receipt Number:
Grant Number:
Interment Number: