Leigh on Mendip Parish Council
Application for Interment in the Cemetery

Form to be returned to the Clerk, Joe McGhee, Beynon, Fayreway, Croscombe, Wells, Somerset, BA5 3QZ. Email parish.clerk@leigh-on-mendip.org.uk

This form must be delivered to the Burial Clerk not later than TWO CLEAR WORKING DAYS BEFORE THE PRE-ARRANGED TIME FOR THE BURIAL

Hours of interment Monday to Saturday 10am to 4pm (Excluding Bank or other Public Holidays)

Deceased Details	
Full name of deceased:	
Place that death occurred	
Address prior to death	
Age of Deceased	
Date of Death	
Day, Date and Time of Burial	
Name of Funeral Director	
Name and address of officiating Minister	
Is the Grave being re-opened	Yes / No
Is this a second interment in the same plot If yes ERB Number and Grave Number	Yes / No (If No please ask for an application for the grant of Exclusive Right of Burial)
Cremated Remains	
Grave Number	Depth Required
Burial of Ashes	Yes / No
Type of Container	

Previously Purchased Graves
(Not required for Burial of the Registered Owner)

The Registered Owner of the Exclusive Right of Burial must give permission for the burial by signing below:

I consent to grave number …….. being opened for the burial of the late

…….

Signed: Date:

Please contact the Burial Clerk for any queries regarding transferring ownership of the Exclusive Right of Burial

Adopted: - September 2026

New Graves
(An application for the Grant of Exclusive Right of Burial will also need to be completed)

If the grave is to be purchased:

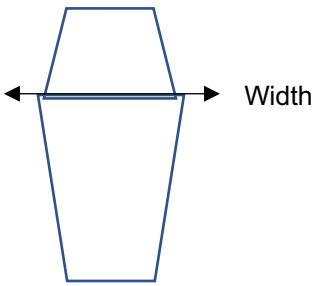
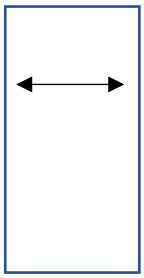
Full name of Purchaser:

Address

Post Code

Note: The person (s) named above will be registered as the grave owner (s) with the deed being made in his/her/their names(s). No memorial may be arranged and no further interment may take place without the signed consent of the grave owner(s).

Grave and Coffin Details

Grave Number	Depth Required
Coffin Dimensions Length _____ Width _____ Height _____ (from base to lid) Length  Width Locking Handles? Yes/No (delete which does not apply) Please provide actual maximum measurements	Casket Dimensions Length _____ Width _____ Height _____ (from base to lid) Length  Width Locking Handles? Yes/No (delete which does not apply) Please provide actual maximum measurements
Signature Date	

As the applicant for internment of a burial / ashes for the grave / plot specified I take to abide by the rules of the Cemetery as stated in the regulations, (a copy will be provided upon the initial application).

Signature

Date

FOR OFFICE USE ONLY
Interment Fees Burial Register No

Plot Entered By

Date

Adopted: - September 2026

Data Protection Legislation: Information that you provide will be held and used in compliance with the Data Protection Act 1998

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