Oak Hill
LAWN CEMETERY & CREMATORIUM
Southway | Hatfield | AL10 8HS
01707 357000
contact-whc@welhat.gov.uk
oakhill.welhat.gov.uk

Please complete this application after you have made a booking by telephoning 01707 357000. The application must be completed in full and received by the council at least three working days prior to the booking date.
Funerals may be delayed if this form is incomplete.

BURIAL APPLICATION FORM

BURIAL SITE AND CHOICE OF BURIAL

Tick as appropriate:

☐ **The Oak Hill Cemetery** (Southway, Hatfield)

☐ **Full burial** (Direct to grave)
☐ **Full burial** (With Chapel)
☐ **Burial of cremated remains** (Direct to grave)
☐ **Burial of cremated remains** (With Chapel)
☐ **Memorial only**

☐ **Hatfield Hyde Cemetery** (Hollybush Lane, Welwyn Garden City)

☐ **Full burial** (Direct to grave)
☐ **Burial of cremated remains** (Direct to grave)

DETAILS OF BURIAL

Day:	**Date:** / /	**Time** (including am or pm)**:**

DETAILS OF DECEASED

Surname of the Deceased:	**Forenames of the Deceased:**	**Title** (Miss/Mrs/Ms/Mr/other)**:**
Date of Birth: / /	**Date of Death:** / /	**Age:**
Sex [tick as appropriate]**:** ☐ **Male** ☐ **Female**	**Religious Denomination:**	

Home address of the Deceased (including postcode)**:**

Place of Death (if not at home)**:**

☐ **Proof of residency within Welwyn Hatfield Borough enclosed – please tick**
(To obtain the local residents rates, proof of residency within Welwyn Hatfield Borough at the time of death or having moved out of the Borough for care within the last two years, must be provided for new graves/plots)

DETAILS OF SPECIFIC BURIAL / CHAPEL REQUESTS

[Tick if appropriate]**:**

☐ **Horses** ☐ **Family to backfill**

DETAILS OF NEW GRAVE

BURIAL PLOT OPTIONS – 75 year licence (Oak Hill Cemetery only) [tick as appropriate]:

- ☐ **Lawn Grave**
- ☐ **Premium Mausoleum** (middle crypt)
- ☐ **Half Grave** (Baby/ Infant Grave and Ashes)
- ☐ **Lawn Islamic Grave**
- ☐ **Mausoleum** (top and bottom crypt)
- ☐ **Lawn Public Grave** (no deed provided)
- ☐ **MG – Memorial Garden** (50 year licence)
- ☐ **Garden Tablet** (50 year licence)

BURIAL PLOT OPTIONS (Hatfield Hyde Cemetery only) [tick as appropriate]:

- ☐ **MG – Memorial Garden** (50 year licence)
- ☐ **Memorial Garden Kerb** (10 year licence)

DEPTH OF GRAVE [tick as appropriate]:

- ☐ **Treble (8ft)**
- ☐ **Double (6ft 6in)**
- ☐ **Single (5ft)**
- ☐ **Shallow Grave**
- ☐ **Cremated remains** (in container) **(2ft)**
- ☐ **Cremated remains** (buried loosely)

NOTE: Maximum depth for Casket Burial is Double (6ft 6in)

CONTAINER DETAILS [tick as appropriate]:

- ☐ **Coffin**
- ☐ **Casket**
- ☐ **Cremated remains container**

SIZE: **Length** (feet & inches) _____ **Width** (inches) _____ **Height** (inches) _____

NOTE: Please don't forget to include the handles in your width size

I verify that the size of container is correct – please tick ☐

DETAILS OF LICENCE HOLDER/HOLDERS

LICENCE HOLDER:

Title:	**Forename(s):**	**Surname:**

Address (including postcode):

Telephone:	**Email:**

SECOND LICENCE HOLDER (if applicable):

Title:	**Forename(s):**	**Surname:**

Address (including postcode):

Telephone:	**Email:**

DETAILS FOR LICENCE HOLDER/HOLDERS (cont.)

In being granted the Exclusive Right of Burial/Licence, I hereby agree to abide by the cemetery rules and I am aware that no form of memorials, other than that prescribed under the council's cemetery regulations will be placed on the purchased grave. I also acknowledge that any unauthorised item(s) will be removed from the grave space. Upon payment of the necessary fee, the item will be dedicated for the relevant period from the payment date. The dedication at the council's discretion may be renewed at the end of the period subject to the regulations then in force. Should the licence/grant period expire, the council reserve the right to remove an memorial and possibly make the grave available for future re-use.

I confirm I have read the above statement and also the rules and regulations of the cemetery.
The information collected on this form isnecessary to process your application and will not be used for any other purposes. **Please tick this box to confirm that you are happy to provide this data.** ☐

Signature of Licence Holder:	**Date:** / /
Signature of Second Licence Holder (if applicable)**:**	**Date:** / /

DETAILS FOR RE-OPENING EXISTING GRAVE

Please ensure any memorials are removed from graves/plots at least 3 working days prior to the booking.
(Memorials on the pre determined plinths at the Lawn Cemetery do not need to be removed.)

PLOT NUMBER: | **Tick if Owner Burial** ☐

DETAILS OF PERSON(S) IN GRAVE SPACE:

BURIAL PLOT OPTIONS [tick as appropriate]**:**

- ☐ **Lawn Grave**
- ☐ **Garden Tablet**
- ☐ **Half Grave** (Baby/ Infant Grave and Ashes)
- ☐ **Lawn Islamic Grave**
- ☐ **MG – Memorial Garden**
- ☐ **Memorial Garden Kerb** (Hatfield Hyde only)

DEPTH OF GRAVE [tick as appropriate]**:**

- ☐ **Double (6ft 6in)**
- ☐ **Single (5ft)**
- ☐ **Cremated remains** (in container) **(2ft)**
- ☐ **Cremated remains** (buried loosely)

CONTAINER DETAILS [tick as appropriate]**:**

- ☐ **Coffin**
- ☐ **Casket**
- ☐ **Cremated remains container**

SIZE: **Length** (feet & inches) _____ **Width** (inches) _____ **Height** (inches) _____

NOTE: Please don't forget to include the handles in your width size

I verify that the size of container is correct – please tick ☐

DETAILS OF LICENCE HOLDER/HOLDERS

LICENCE HOLDER:

Title:	Forename(s):	Surname:

Address (including postcode)**:**

Telephone:	Email:

SECOND LICENCE HOLDER (if applicable)**:**

Title:	Forename(s):	Surname:

Address (including postcode)**:**

Telephone:	Email:

In being granted the Exclusive Right of Burial/Licence, I hereby agree to abide by the cemetery rules and I am aware that no form of memorials, other than that prescribed under the council's cemetery regulations will be placed on the purchased grave. I also acknowledge that any unauthorised item(s) will be removed from the grave space. Upon payment of the necessary fee, the item will be dedicated for the relevant period from the payment date. The dedication at the council's discretion may be renewed at the end of the period subject to the regulations then in force. Should the licence/grant period expire, the council reserve the right to remove an memorial and possibly make the grave available for future re-use.

I confirm I have read the above statement and also the rules and regulations of the cemetery.
The information collected on this form isnecessary to process your application and will not be used for any other purposes. **Please tick this box to confirm that you are happy to provide this data.** ☐

Signature of Licence Holder:	Date: / /

Signature of Second Licence Holder (if applicable)**:**	Date: / /

Please read the Transfer of Exclusive Rights to Burial Guidance located on our website: oakhill.welhat.gov.uk/deed-holders/exclusive-rights-burial/2

DETAILS OF FUNERAL DIRECTOR / PERSON MAKING ARRANGEMENTS

Name:

Address (including postcode)**:**

Telephone:	Email:

Signature:	Date: / /