



TIDWORTH TOWN COUNCIL CIVILIAN CEMETERY

NOTICE OF INTERMENT

NAME, ADDRESS & TELEPHONE NUMBER OF FUNERAL DIRECTOR: .....

SURNAME OF DECEASED: .....

FORENAMES: .....

LAST PERMANENT ADDRESS: .....

OCCUPATION: .....

SEX: MALE/FEMALE AGE: .....

PLACE OF DEATH: .....

DATE OF DEATH: .....

INTERMENT DETAILS: DATE: ..... TIME: .....

SERVICE: CHURCH/GRAVESIDE/NO SERVICE

Burial

Interment

GRAVE DETAILS: NEW/RE-OPEN DOUBLE/SINGLE DEPTH

GRAVE NO: .....

EXTERNAL SIZE OF: COFFIN: .....FT .....INS X .....INS

CREMATION CASKET .....INS X .....INS

SIGNED: ..... DATE: .....

AUTHORISED BY: ..... DATE: .....  
TOWN CLERK:

**We need to keep in contact regarding the maintenance and lease terms of this grave, therefore please provide details below and any changes thereafter:**

NOK of Deceased: ..... Contact No.: .....

Address: .....