



Plume of Feathers, Upper Green
Ickleford, Hitchin
SG5 3YD

Mobile 07968 159771
Email clerk@alleyfield.org.uk
Website www.alleyfield.org.uk

NOTICE OF INTERMENT

This Notice, fully completed, must be received by the Trust at least 3 full working days in advance of the date of interment by either email or post. The date and time of an intended interment should be confirmed as available with the Trust before it is confirmed with the Customer. All interments will need to be paid for prior to the date of interment.

A copy of the Green Burial Certificate, Coroner's Certificate or Cremation Certificate must be filed with this form and the original given to the Official on the day. No interment may take place without the appropriate certificate of disposal issued by the Registrar being presented at the time of interment.

All funerals will be at the time arranged. All unexpected delays of more than 15 minutes must be reported to the Trust.

It is the responsibility of the Undertaker to ensure that the required details are correct and the form is signed. The Trust will not accept responsibility for loss or delay of any notice. Any alterations will be subject to approval from the Trust.

The Trust can only authorise the opening of a purchased grave with the permission of the owner or to inter the owner. In all other cases, ownership must be transferred to someone who can legally prove that they are entitled to receive these ownership rights. When the Grave Grant Owner is deceased, then the appropriate form(s) will need to be completed by all persons to enable the transfer of ownership of the said Grave Grant. Evidence in the form of Grant of Probate, Sealed Letters of Administration or a Statutory Declaration will also be required.

The removal of memorials must be carried out at least 72 hours before the burial takes place.

The Trust Offices are closed on Saturdays, Sundays and public holidays.

The particulars must be completed in BLOCK CAPITALS and in ink and be fully and accurately stated.

Registered Charity Number 1132106



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APPLICATION FOR INTERMENT AT ALLEYFIELD

Full Name of Deceased _____

Date and Place of Death _____

Address of Deceased (if in a care home, please provide previous address as well):

If not a resident of Ickleford

Was the deceased a former resident of Ickleford? YES/NO please delete

If YES, please state address and dates _____

Did the Deceased have a close association with Ickleford? YES/NO please delete

If YES, please state details of the association

Day, date and time of interment _____

Funeral Director / Contact name and number _____

Service to be held at & time (church/graveside) _____

Attendees on the day (Please specify – None / Family / Minister) _____

Name and denomination of officiating Minister _____

Will the land be consecrated before interment? YES/NO

Type of Grave (New, Re-open (ashes only) or Pre-Purchased) _____

Grave number (if re-open or pre-purchased) _____

If re-open, please provide name of person previously buried _____

If re-open, has removal of memorial been arranged? YES/NO

If YES, please state Stone Mason and contact details _____

All graves are single 5ft depth and all ash plots are 2ft depth

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Size of coffin / ashes casket length _____ width _____ depth _____

Details of Funeral Director / Arranger

Name _____

Address _____

Email address _____

Telephone number _____

Signed _____ Date _____

Please complete

Section A (new grave/new ashes) or Section B/C (re-open ashes/ pre-purchased)

And Section D

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Section A: New Grave only

I would like to purchase the Exclusive Rights of Burial for 75 years:

Full name _____ Title _____

Home address _____

Postcode _____

Email _____

Telephone number _____

Relationship to the deceased _____

Signature _____ Date _____

Print Full name _____

Section B: Previously purchased to be opened by the Grant Owner

To be completed by the grave grant owner

Please open grave number _____ at Alleyfield, Ickleford Burial Ground

For the interment of _____

I am the registered owner of the grave.

Signature _____ Date _____

Full name _____ Title _____

Home address _____

Postcode _____

Email _____

Telephone number _____



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Section C: Previously purchased to be opened where the Grant Owner is deceased

To be completed by the next of kin / executor / administrator where the deceased is the grant owner.

Please open grave number _____ at Alleyfield, Ickleford Burial Ground

For the interment of _____ (the said Grant Owner)

I am the next of kin / executor / administrator of the Owner's estate (please delete). If none of the above, please state your relationship to the deceased grave owner _____

Signature _____ Date _____

Full name _____ Title _____

Home address _____

_____ Postcode _____

Email _____

Telephone number _____

Section D Regulations

To be completed by the grave grant owner

I confirm that I have been provided with a copy of the Regulations as to Memorials and Floral Tributes permitted by the Trust in Alleyfield – Ickleford Burial Ground and agree to abide by such regulations.

Signed _____ Date _____