

## NOTICE OF INTERMENT OF CREMATED REMAINS

This form is to be completed by the grave owner/s, the person/s that wish to purchase the exclusive rights to a new grave or the applicant for cremation where the deceased is the grave owner. The cemeteries are governed by law and by regulations, a copy of which is downloadable from [www.enablelc.org](http://www.enablelc.org) or from the office.

Where an appointment has been made this form must be completed and the fees paid within **24 hours of the booking being made**. Forms are not accepted prior to an appointment being made.

### Person to be buried

Full name (Mr/Mrs/Miss/Ms) \_\_\_\_\_

Home address at time of death \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Date of death \_\_\_\_\_ Age \_\_\_\_\_

Date of cremation \_\_\_\_\_ at \_\_\_\_\_ crematorium

Funeral director \_\_\_\_\_ Phone \_\_\_\_\_

Resident  Non-resident Grave owner **Y / N**

Denomination \_\_\_\_\_

### Details of grave

New cremated remains plot for up to 4 sets of cremated remains (Putney Vale only)

Existing grave No. \_\_\_\_\_ Block \_\_\_\_\_

**Cemetery**  Morden  Putney Vale  Wandsworth

### Details of interment

Day and date of burial \_\_\_\_\_ Time \_\_\_\_\_

Would you like to meet the attendant at:

the office  chapel  at the graveside

The cremated remains will be:

brought on the day  are at Putney Vale Crematorium

other Please state \_\_\_\_\_

Type of container (e.g. wooden casket, scatter tube) \_\_\_\_\_

Name of deceased \_\_\_\_\_

**Grave ownership** (tick one)

**1. Authorisation to open and inter a grave**  
Where there is more than one owner, all owners must sign below to authorise the opening and interment in this grave.

**2. Application for burial**  
Where the deceased is the/a grave owner, only a signature of the applicant for the burial is required.

**3. Application for ownership of the grave**  
For new graves, one or two persons may be registered as the owner(s). The deed to the grave will be issued to the person listed as owner 1.

**Owner 1/applicant**

Name (Mr/Mrs/Miss/Ms) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Owner 2 (if applicable)**

Name (Mr/Mrs/Miss/Ms) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone \_\_\_\_\_

Email \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

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**Correspondence**

Correspondence should be directed to  
Putney Vale Cemetery and Crematorium  
Stag Lane, Putney  
London, SW15 3DZ

Tel: 020 3959 0090  
Email: [bereavement@enablelc.org](mailto:bereavement@enablelc.org)

Cheques payable to **Enable Leisure & Culture**