



BURIAL FORM FOR TOTNES CEMETERY
FOLLATON, PLYMOUTH ROAD, TOTNES

Surname of Deceased:

Forenames:

Sex: Age:

Profession or Occupation (if known):

Home Address:

Date of Death:

Where death occurred (if different from above):
.....

Date of Burial: Time:

Grave Section – Religious Denomination:

Grave No:

Type of Grave (Body or Cremation): (New Grave or Re-open):.....

Type and size of Coffin or Casket to be used:

Name of Purchaser of Grave and/or next of kin if different:
.....

Address:

Deed of Grant Number and original enclosed (unless new grave):.....

Details of last interment:

Removal of memorial (if applicable):

Minister:

Name and Address of Funeral Director: Tel.No:

Date:

For Official Use: Burial Register No: Deed of Grant No (if applicable):

Charges & Fees: