



**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:  
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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: .....

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

Charges & Fees: ..... Invoice Number: .....