

# Amersham Town Council

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<b>NOTICE OF INTERMENT - BURIAL</b>	
<b>A COMPLETED FORM MUST BE RECEIVED IN THE OFFICE BY AMERSHAM TOWN COUNCIL THREE WORKING DAYS PRIOR TO THE INTERMENT. ALONG WITH PAYMENT AND THE CERTIFICATE FOR BURIAL</b>	
<b>FIRST NAME(S), SURNAME &amp; FULL ADDRESS OF THE DECEASED</b>	
<b>AGE OF DECEASED AT LAST BIRTHDAY (FOR PERI-NATAL - DAYS)</b>	
<b>DAY &amp; FULL DATE OF DEATH</b>	
<b>PLACE AT WHICH DEATH OCCURRED</b>	
<b>DAY &amp; DATE BURIAL TO TAKE PLACE</b>	
<b>TIME FUNERAL WILL ARRIVE AT CEMETERY</b>	
<b>NAME OF MINISTER ATTENDING</b>	
<b>GROUND TYPE</b>	<b>UNCONSECRATED</b>
<b>TYPE OF GRAVE</b>	<b>PRIVATE GRAVE</b>
<b>NAME &amp; FULL ADDRESS OF DEED OF GRANT HOLDER</b>	
<b>SIGNATURE OF DEED OF GRANT HOLDER</b>	
<b>RELATIONSHIP OF DEED OF GRANT HOLDER TO THE DECEASED</b>	
<b>CEMETERY NAME</b>	
<b>SECTION NO.</b>	
<b>GRAVE NO.</b>	
<b>DEPTH (SINGLE OR DOUBLE)</b>	
<b>EXTERNAL MEASUREMENT OF COFFIN EXCLUDING ANY FIXINGS</b>	<b>HEAD                      SHOULDER</b>
	<b>FOOT                      LENGTH</b>
<b>NAME &amp; FULL ADDRESS OF FUNERAL ARRANGER</b>	
<b>SIGNATURE OF FUNERAL ARRANGER</b>	
<b>DATE</b>	