



Blockley
Parish
Council

MEMORIAL APPLICATION

STATION ROAD CEMETERY, BLOCKLEY



Please complete and return prior to commencing works to:

Clerk to Blockley Parish Council
Blockley Heritage Centre, Park Road, Blockley, GL56 9BY

Tel: 01386 701602
Email: parishclerk@blockley.org.uk

DECEASED	Surname:	Plot No:
	Forenames:	

APPLICANT	Name:	Tel:
	Address:	Email:
	Relationship to Deceased:	

MASON	Name:	Tel:
	Address:	Email:

APPLICATION & MEMORIAL DESIGN	Work requested (✓) <input type="checkbox"/> New Memorial <input type="checkbox"/> Replace Memorial <input type="checkbox"/> Additional Inscription <input type="checkbox"/> Repair or Removal		
	Memorial type (✓) <input type="checkbox"/> Headstone <input type="checkbox"/> Cross <input type="checkbox"/> Plaque, Tablet, Book <input type="checkbox"/> Vase		
	Stone type:	Surface finish:	Colour:
	Height:	Width:	Thickness:
	Inscription:		
<i>Please attach or include diagram of memorial overleaf to show design shape, inscription and any motif.</i>			

CONDITIONS	<ol style="list-style-type: none"> Applications must comply with requirements of Blockley Parish Council policy (copy available on request) Installation must be in accordance with BRAMM / NAMM Code of Working Practice Name of memorial mason and plot number shall be cut into lower rear of memorial Applicant remains responsible for memorial safety, maintenance and associated costs Parish Council reserves the right to remove or repair unsafe memorials and to recover costs from applicant Date and time of works to be approved by Clerk to the Parish Council and fee payment made before installation 	
	I request approval for the above memorial application and confirm my acceptance of the Parish Council conditions. Applicant Signature Date	

For Council Use:

Application approved by:		Date:
Memorial Fee:	Date Paid:	Register No: