

Linkinhorne Parish Council

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APPLICATION TO POSITION A MEMORIAL UPTON CROSS CIVIC CEMETERY

| | |
|--|--|
| NAME OF APPLICANT | |
| ADDRESS | |
| | |
| | |
| TELEPHONE NUMBER/FAX | |
| E-MAIL | |
| MASON'S NAME | |
| ADDRESS | |
| TELEPHONE NUMBER | |
| Type of anchoring system used | |
| Number of years monument is guaranteed for | |
| PLOT NUMBER | |
| DATE OF LAST BURIAL | |
| SIZE OF MEMORIAL cms | |
| HEIGHT | |
| WIDTH | |
| DEPTH | |
| MATERIAL | |
| FINISH | |
| INSCRIPTION | |

| | |
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| | |
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Please attach a sketch/photo showing the design of the monument and plinth