

THESE TABLETS ARE LOCATED ON THE TOWERS WITHIN THE GARDEN OF REMEMBRANCE

**ST HELENS CREMATORIUM
MEMORIAL TABLET LEASING SCHEME**

The following notes are for the guidance of persons applying to lease Memorial Tablets at St Helens & Newton Le Willows Cemeteries
These notes are not exhaustive, queries may be referred to
The Cemeteries and Crematorium Manager
The Crematorium Building
Rainford Road
St Helens, Merseyside, WA10 6DF

Tel: (01744) 677406/677407

- 1) All tablets are of granite, locations are allocated by the Cemeteries and Crematorium Manager.
- 2) Any item placed within the Crematorium Grounds may, at the discretion of the Cemeteries & Crematorium Manager be subject to relocation or removal without further notice.
- 3) The Authority cannot accept liability for the loss of or damage to any memorial, floral tribute or other article which may be fixed or placed within the Crematorium grounds however such loss or damage may be sustained.
- 4) The lease allowing a tablet expires on the 10th anniversary of the date it was issued. A reminder notice will be sent to the last known address of the lease holder one month prior to the expiry date.
- 5) A maximum of 3 lines of inscription are possible on each tablet
- 6) No line of inscription may contain more than 18 letters.
- 7) No inscription may be added to a name line.
- 8) The Authority retains the right to amend or refuse any inscription considered inappropriate.

(Revised August 2011)

**ST HELENS CREMATORIUM
LEASE OF MEMORIAL TABLET**

Cremation number _____

PURCHASER _____

ADDRESS _____

Telephone number _____

INSCRIPTION DETAILS: (Please print 1 letter per box)

I understand and agree to abide by the terms and conditions applicable to the leasing of Memorial Tablets.

I request that the tablet be located at *St Helens/Newton-Le-Willows Cemetery (*Please delete)

Near _____ if possible

Signed: _____ Date: _____

Payment Methods: Credit/Debit card by 'phone or in person or by cash in person. (Unfortunately, we no longer accept cheques).
Please refer to the enclosed price list for current fees and charges

Office Use

Application received: _____ Receipt No: _____

Tablet Location: _____ Allocated by: _____