



St. Helens Council

Memorial Work Application

Grave Section:

Grave Number:

Cemetery: St. Helens*/Newton* *(Please delete)
Application form to be sent (with applicable fee) to:

Cemeteries and Crematorium Office

Crematorium Building

Rainford Road, St. Helens WA10 6DF

Tel: 01744 677407/677406 • **Fax:** 01744 677411

Email: sthelenscemetery@sthelens.gov.uk

Office Use Only

Date:

Permit No:

Fee paid:

Receipt No:

Please tick ✓ box

New Memorial: (Drawing overleaf & inscriptions)

Additional Inscription: (See below)

Replacement Memorial - no additional inscription: (Drawing overleaf)

Replacement Memorial - with additional inscription: (Drawing overleaf & inscriptions)

Kerb Set (Extended garden form required if applicable): (Drawing overleaf)

Other (i.e. vase, figure etc.):

Description of other:

Ground Anchor (**Type of fixing method**): (Size of fixings to be shown overleaf)

A drawing showing ALL dimensions, dowel sizes etc. must appear overleaf.

Memorial Material:

Inscription Details:

I hereby authorise (**Stonemason**):

Name of Funeral Service arranging Stonemason (if applicable)

To carry out the work detailed above and in accordance with the drawing shown overleaf (if applicable)

Grave Owner(s)/Applicant: Print name(s):

Date:

Signature(s):

(All Grave Owners must sign)

Grave Owner contact address:

Re: Memorial Work

All Memorial work must be carried out by appointment only.

All Stonemasons must be off site by 4.00pm, Monday to Thursday, and 3.00pm on Friday.

No work to commence without Council Supervisor authority.

Location supervised by: Signature: Date:

Supervisor print name:

Type of work carried out:

Please tick ✓ a box

- Located
- Headstone removed
- Inscriptions
- Ground anchor fixing
- Install memorial/vase/kerbs
- Renew dowels

Work completed by STonemason - Signature:

Supervised by - Signature:

Date:

Drawing must be shown with all measurements, method of fixing and dowel sizes:

Approver's comments:

Drawing approved by - Signature:

Date approved: