

GODALMING TOWN COUNCIL

Application to Erect Memorial/Carry Out Remedial Works/Add an Inscription

We hereby apply for permission to erect the Memorial/carry out remedial works/add an inscription* (*delete as necessary) described below and **confirm that the work we carry out will be to the standards as laid down by NAMM (National Association of Memorial Masons) and agree to comply with their Code of Practice and Godalming Town Council's Cemetery Regulations.**

Name of Masons _____

Address _____

_____ Date _____

Signed on behalf of Masons supplying and installing memorial _____

Printed Name _____ Position Held _____

Name of Cemetery: _____

Grave No: _____ Section _____ Grant No: _____ Garden of Remembrance _____
(Please tick)

Full Name of Deceased _____

Permanent Address at Time of Death _____

I authorise this application and the execution of the work.

Print Name

Signature of Registered Owner of the Grave

Address _____

NOTE: If the owner of the grave is deceased, the ownership must be transferred before this application can be approved. (This section is not relevant to Memorials in Garden of Remembrance).

DESCRIPTION OF MEMORIAL

Materials to be used: _____

	Height	Width	Depth
Overall Size			
Headstone			
Base			
Kerbs			
Foundations			

NAMM approved method to be used:

Fixing Method NAMM approved methods to be used:			
Based to Foundation/Ground:			
Plate to Base:			
	Height	Width	Depth
Freestanding Vase			
Memorial Tablet			
Chippings Colour (if any):			
Description and size of any other items to be included:			

INSCRIPTION

(Set out here the words of the proposed inscription, continue overleaf if required or attach a separate sheet if preferred)

DESIGN OF MEMORIAL

A photograph or a drawing to scale of the proposed memorial is to be attached.

Type of Memorial	
Material	
Colour	
Surface Finish	
Type of Lettering	
Size of Lettering	
Carving/Decoration Description and Colour	

EXISTING MEMORIAL

If there is already a memorial on the grave, give brief description: