

GARDEN OF REMEMBRANCE

Application for Committal of Cremated Remains in the Garden of Remembrance

Please complete this form in BLOCK CAPITALS

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Form 1	Name and details of A	Applicant
Name including title: Mr/Mrs/Miss/Other (Please delete as appropriate)		
Address:		
		Post Code:
Day-time telephone number:		
Email Address:		
Relationship to deceased:		
	Full name and details o	of Deceased
Surname:		
First Name/s:		
Address:		
		Post Code:
Date of Death:		
Age at Date of Death:		
Male/Female:		
Is this for an existing plot? Yes / No	If yes, please give name	:
	Committal of Cremate	
Do you and/or any other repattend the committal of the		Yes No (Please circle your choice)
Do you give consent for us t details if we have enquiries t than the applicant regarding	from someone other committal details?	Yes No (Please circle your choice)
If a committal or scattering, convenient dates and times of 5 working days from the i	giving a minimum notice receipt of the completed	Date & Time:
form. Committals normally t	ake place on a weekday	Date & Time:

The Application Form must be accompanied by a copy of the Certificate of Cremation unless kept with the ashes for interments or scatterings.

between the hours of 9am and 12 noon.

Do you intend arranging for a Minister and or Funeral Director to officiate at the committal?

If Yes, please give the name of Minister/ Funeral Director. It is the Applicant's responsibility to arrange for a Minister/Funeral Director if required.

If you have any special requests, please add them here; we will do our utmost to help but cannot guarantee that we will be able to fulfil all requests. You may also put' *known name'* for scatterings and interments with a council official in attendance for the reading words.

Form 1 July 2024

Yes

(Please circle your choice)

No



Garden of Remembrance

Please indicate which <u>service</u> you require by placing a circle around your choice. Refer to memorial selection below.

All fees include VAT at 20%

1. Committal with Site Marker 2. Scattering 3. Memorial Only

7. Columbarium Currently we are not offering any tree adoptions.

1. (Committal	of	cremated	remains	with	in	terment	t si	te	marl	ker
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Marker details -

Material: Bronze Size: 127mm x 76mm plaque on a vertical spur

Inscription: Up to 4 lines with a maximum of 28 (approx.) letters per line (Please use Capitals)

Fee: 10-year renewal time span £308.00 resident of SWF

10-year renewal time span £334.00 non-resident of SWF

Some faiths require the ashes to be committed into an urn when placed in the ground. We can supply a biodegradable urn at additional cost to be placed into the plot. If you wish for the ashes to be committed within an urn, please also complete Form 3

Please use this box to indicate the inscription required for the interment site marker.

2. Scattering The scattering of cremated remains will be carried out in the scattering copse. A site marker is not required for this service. However, a memorial may be purchased from the list below in addition.

Scattering of cremated remains £119.00

NOTE: Scattering of ashes will be charged for people living outside SWF £129.00

3. Memorial only Important note:

Any of the memorials detailed below may be purchased without a committal or scattering of cremated remains. If this service is required, please circle option 3 above. (**PLEASE NOTE**) A one off administration charge of £48.00 will be charged in addition to the cost of the memorial.

Memorials

Please indicate which memorial you require by placing a circle around your choice.

A proof will be sent in all cases, for you to confirm your wording.

4. Single Name Wall Plaque 5.Double Name Wall Plaque 6.Kerb Edge Memorial

Adopt a Tree - not available.

4. Wall Memorial Plaque (Single name)

Material: Avonite (granite appearance) in Belgian Black

Size: 64mm x 205mm

Inscription: 3 lines with a maximum of 56 letters. Engraved inscriptions enamelled white.

(Please use Capitals)

Comments: One name per plaque

Cost: 10 year renewal time span £147.00 (see note 3)

Please use the box to indicate the inscription required for the memorial.				

Form 1 July 2024

Material: Size:	morial Plaque (Two Avonite (granite appe 104mm x 205mm 6 lines with a maximu	earance) in Polar Whit	te -	inscription)
Engraved in	scriptions enamelled.	Please indicate if you	u require black or	gold
	otif: If required <u>please</u> signs are included on a			
Please circle	Please circle your choice: Top Centre Bottom Centre Other			
Please indic	ate if a second inscript	tion is to be added at	a later date.	
Fee:	10 year renewal time s	span £258.00		
	Please use box to inc	dicate the inscription	required for the mem	norial.
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
(Blank ker date – fee Material: Size:	ge Memorial b edge memorials and on application) Granite in Karin Grey 300mm x 150mm x 1 3 lines with a maximu	00mm um of 56 letters. No li	ne longer than 18 let	ters. (Please use
are placed. Comments: Fee:	The memorial has a property of the name per plaque 10-year renewal time	e.	vnich the enamelied b	olack engravings
	Please use bo	ox below to indicate i	nscription required.	

Renewal for wall plaque, kerb stone, site marker, or tree £106.00

7. Internment of Ashes in the Columbarium Adult

Loved ones can be remembered by their ashes being interned into our Columbarium. A plaque placed at the front of one of the allocated spaces.

25-year renewal time span

Material: Black plaque, with lettering, with options of various motifs

Size: 127mm x 76mm plaque on a vertical spur

Inscription: Up to 16 lines, each with a maximum of 22 letters/ symbols.

Ashes will be placed inside a stainless-steel urn. There is space for 2 urns in each Niche. Prices for **resident Adult** of SWF start at £530, and **non-resident Adult £986**. Additional options may increase the costs stated, which are explained on **Part 2A form**.

Interment of Ashes for a Baby or Child in the Columbarium are reduced as part of the policy of the Town Council to support those who have suffered the loss of a baby or child. This is <u>a single space niche</u>. Please see **form part 2C** for details and prices.

Interment of children in an adult columbarium are not discounted.

If you have selected a Columbarium internment, then you will need to complete form **2A** or **2C** so you can select wording and type of fonts used. You will need to complete this additional form before we can place an order to complete the internment.

Renewal for each Columbarium Existing Internment space 25 year renewal time span £295.00

Form 1 July 2024

Cremated Remains and Certificate of Cremation Please tick as appropriate. Tick one box only
The cremated remains, together with the Certificate of Cremation, are with Paul King, Funeral Director, 5 Guild Way, South Woodham Ferrers.
The cremated remains, together with the Certificate of Cremation, are with Co-Operative Funeral Services, 31 Hullbridge Road, South Woodham Ferrers.
If the cremated remains and Certificate of Cremation are not being stored at either of the above premises, please make arrangements for them to be delivered to Paul King at 5 Guild Way, South Woodham Ferrers. The Town Council has arranged with Paul King that he will store the cremated remains until the date of the committal.
I will arrange for the cremated remains, together with the Certificate of Cremation, to be sent to Paul King, Funeral Director, 5 Guild Way, South Woodham Ferrers, giving a minimum of <u>5 clear working days</u> prior to the committal.
I wish to make arrangements for an alternative Funeral Director of my choice to conduct the committal. (Please complete details of alternative on page 1).
This completed form(s) and the fee must be received before any action can be taken by the Council. Please do not hesitate to contact the Town Council if you require any assistance or have any queries.
Please sign the declaration below if you are requesting the following: -
I request the committal/scattering of cremated remains as detailed on this form.
I confirm that the details entered for the site marker inscription are correct and understand that they cannot be altered subsequently.
Please call/visit the office on 01245 429 441 to pay by card.
I have received a copy of the regulations and agree to be bound by them.
Signed:
Please sign this part of the form if you have requested a memorial : -
I hereby request the grant of a right to the placing of a memorial plaque supplied and fixed by the Town Council for a period as specified in this application.
I understand that the Council does not accept any responsibility for the theft of or damage to or deterioration of any memorial in the Garden of Remembrance.
I confirm that the details entered for the memorial inscription are correct and understand that they cannot be altered subsequently. I enclose the appropriate fee. (Cheques made payable to South Woodham Ferrers Town Council).
Signed:
Please return the competed form to: The Registrar, South Woodham Ferrers Town Council, Champions Manor Hall, Hullbridge Road, South Woodham Ferrers, Essex, CM3 5LJ Telephone: 01245 429441. We recommend you call to arrange an appointment if visiting the offices in person.
Optional question How did you hear about us/the gardens?

Form 1 July 2024