



APPLICATION FOR DUPLICATE LAIR CERTIFICATE

To be completed by the Title Holder

I (name) _____ (address) _____
_____ declare that I am the holder of the
exclusive right of burial in Lair Number: _____ in Section _____ of
_____ Cemetery and request that a Duplicate Certificate be issued to me.

I understand that the Council accepts the above declaration in good faith and does not accept any liability for any loss, claim, damages or costs, which may occur as a result of any actions undertaken on the reliance of this declaration. Any liability shall be borne by me as the applicant for a duplicate certificate.

Signature: _____ Date: _____

Witness (PRINT): _____ Signature: _____

Address: _____

Data Protection Act 1998 please tick box if you do not wish this information to be shared with other interested parties

If address has changed since lair was acquired, please state below, address at time of lair purchase :

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.....
.....

FOR OFFICE USE ONLY

Date Received: _____ Checked: _____ Folio No: _____

Certificate Fee: £ Comments: _____
Surcharge: Yes/No