

Form E.A.6

Bereavement Services
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Form of Renunciation

Please complete in **CAPITAL LETTERS** and *Delete as appropriate

***I/we**, the undersigned hereby renounce all ***my/our** interest and title in the Right of Burial described in the Plan as **Section** _____ **Lair No/s** _____ in the _____ **Cemetery**, and desire that the said Right of Burial shall be vested ***solely/jointly in *my/our *brother/sister or other, please state:** _____

Enter full name and address of person/s renunciation is in favour of:

Please complete in **CAPITAL LETTERS**

Applicant/s Name:

Applicant/s Signature:

Applicant/s Full Address:

Witnesses Name:

Witnesses Signature:

Witnesses Full Addresses:

On this _____ Day of _____ 20 _____

FOR OFFICE USE ONLY

Date Received: _____ Checked: _____ Folio No: _____

Certificate Fee: £ Comments: _____