

**NOTICE OF FUNERAL**

Bereavement Services  
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**East Ayrshire**  
COUNCIL

### KILMARNOCK CEMETERY BABY SECTION / CUMNOCK CEMETERY BABY SECTION

This form should only be used for an interment of a **baby** in the **Baby Section** and must be completed and delivered to the Bereavement Services Office as soon as possible and, in any case, not later than **11am on the working day prior to interment**. The prompt delivery of this form is essential in ensuring the smooth running of the service.

There are 2 dedicated areas within Kilmarnock & Cumnock Cemeteries for the burial of a baby.

- Individual Lair** – this allows for the burial of a baby and also up to 6 cremation caskets to be buried in the same plot thereafter. **A small memorial may be erected.** There is a fee to purchase this lair and to erect a memorial.
- Single Baby Lair** – this allows for a baby to be buried in a single grave. There will be **no further interments** in this lair. A memorial **cannot** be erected on this grave but the baby's name can be recorded on the central memorial. There is a small fee to add the baby's name to the memorial.

*Please complete the **Cemetery & Section** required (Individual or Single). (The Lair Number will be completed by Bereavement Services)*

CEMETERY: \_\_\_\_\_ SECTION: \_\_\_\_\_ LAIR NO: \_\_\_\_\_

Funeral Director: \_\_\_\_\_  
(name/address)

Full Name of Baby: \_\_\_\_\_

Address: \_\_\_\_\_

NVF  Stillborn  Age: \_\_\_\_\_ Gender  M  F Day and Date of Death: \_\_\_\_\_

DAY and DATE of Interment: \_\_\_\_\_

TIME of Interment: \_\_\_\_\_  a.m.  p.m.

Exact Coffin/Casket Size: \_\_\_\_\_ *(Head Width, Foot Width & Coffin Depth must be completed)*

Head Width: \_\_\_\_\_ Foot Width: \_\_\_\_\_ Coffin/Casket Depth: \_\_\_\_\_

Mother's Full Name & Address: \_\_\_\_\_

Father's Full Name & Address: \_\_\_\_\_

#### TO BE COMPLETED FOR THE PURCHASE OF AN INDIVIDUAL BABY LAIR

Full Name of Purchaser: \_\_\_\_\_

Maiden Surname (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

#### FOR OFFICE USE ONLY

Date/Time Received: \_\_\_\_\_ Lair Fee: \_\_\_\_\_ Date Deed/s Issued: \_\_\_\_\_