

Valid until 31st March 2022

1. Full name of the person who has died

Address _____

Postcode _____ Date of birth _____

Date of death _____ Age _____

2. What do you wish to arrange?

- A Burial An Ashes Interment
- The rights are pre-purchased, Reg No. _____
next to _____

Please reserve an additional right of burial for

Full name _____

Address [as above] _____

Postcode _____

Date of birth _____ Ashes or burial?

3. Form giving authority to bury/inter

Please scan and email the original form(s) to us

- Form 14, or Received
- Procurator Fiscal's Certificate, or
- Cremation Certificate, or
- Other _____

Form Ref. No. /date _____

Office use:

Plot Ref: _____

PGM PGM PGM

Notes _____

Added to Calendar; Coffin size OK; BN issued

Res plots on plan; Certs issued; Inv.# _____

Paid £ _____ by FD, Appl, by BACS/Chq/Cash?

Payment OK? Date _____

4. Requested date:

Day: _____ GD; Cust

Arrival time _____ departure _____

5. Funeral Co. _____

Contact _____

Tel _____

Email _____

6. What type of event are you planning?

- Simple committal with a graveside service
- Committal after a service elsewhere
- A longer celebration of life
- Other _____

Numbers expected: people _____ / cars _____

Special requests: _____

Tell people to wear suitable clothes and shoes (or wellies),
and perhaps to bring folding chairs and blankets.

7. The family representative on the day will be:

Mobile (optional) _____

8. Will you use a celebrant or minister? Yes / No

Name _____

9. Who will bear the coffin?

- Funeral director's staff, or Friends and family, or
- A combination of these

Please read and circulate our guide to health and safety
<http://www.leedam.com/health--safety.html>

10. Type and size of coffin, shroud or casket

Materials: _____

Max. external size - leave blank if not actually measured

Length: _____ Width: _____ Height: _____

Confirmed by: _____

11. Environmental responsibility

- No embalming chemicals are being used
- Coffin/casket is made from only natural materials
- Coffin/casket is lined with calico, not plastic
- No unspecified objects are inside the coffin/casket

1st April 2021 - 31st March 2022

12. Payment options Full payment is required two days before the burial or interment.

RIGHT OF BURIAL (plots are single occupancy only)		ASHES INTERMENT	
<input type="radio"/> in the South Glade, £815	£	<input type="radio"/> in the South Glade, £405	£
<input type="radio"/> in the Middle Glade, £815	£	<input type="radio"/> in the Middle Glade, £405	£
<input type="radio"/> in the North Glade, £945	£	<input type="radio"/> in the North Glade, £465	£
<input type="radio"/> in the Spey View 1 area, £1390	£	<input type="radio"/> in the Spey View 1 area, £695	£
<input type="radio"/> on Spey View Bank, £1900	£	<input type="radio"/> on Spey View Bank, £950	£
<input type="radio"/> in Birchwood East, £1125	£	<input type="radio"/> in Birchwood East, £560	£
<input type="radio"/> in Birchwood Middle, £1125	£	<input type="radio"/> in Birchwood Middle, £560	£
<input type="radio"/> in Birchwood West, £1125	£	<input type="radio"/> in Birchwood West, £560	£
<input type="radio"/> Additional burial rights	£	<input type="radio"/> Additional burial rights	£
<input checked="" type="checkbox"/> Registration Fee, £200	£ 200	<input checked="" type="checkbox"/> Registration Fee, £200	£ 200
<input type="radio"/> Memorial Rights (25yrs) £280	£	<input type="radio"/> Memorial Rights (25yrs) £280	£
TOTAL:	<input type="text" value="£"/>	TOTAL:	<input type="text" value="£"/>

Paid to Leedam Natural Heritage by bank transfer to A/c 06006136, S/c 80-02-38, quoting ref: DC+Yourname

13. Signature and declaration

I declare that the information given on this form is accurate. I am the person to whom all correspondence should be sent and am responsible for paying the amounts shown above and confirm that I have read, printed or saved a copy of the Terms and Conditions which apply (<http://www.leedam.com/burial-contract-terms.html>) and understand that on completing this application I am bound by the Terms and Conditions.

IMPORTANT - Please let us know if your contact details change

Signature _____ Full Name _____

Home address As above] _____

Postcode _____

Telephone _____ Mobile _____

Email _____

Date _____ Relationship to 1. _____

How did you find out about us?

14. How we use your personal data and updates

Please send me information about changes at the burial ground and or changes in your products and services (such as memorials, trees etc) by email by phone *Personal information you supply will be used to record and confirm the details of the purchase and to record statutory records of the burials and interments. We may share the details overleaf with the burial ground's custodian and gravedigger at the time of a funeral. We may also use it for our own statistical analysis. We will not share your data with other organisations. After death, we are obliged to keep a register of the date of burial, names in full, age, address and grave number. By law, this data must be accessible to the public.*

15. Separate grave digging charges (Please do not combine these with the payment above)

BURIAL <input type="radio"/> Weekday	£425	ASHES INTERMENT <input type="radio"/> Weekday	£175
Burial at weekends by arrangement only		<input type="radio"/> Saturday interment	£265
<input type="radio"/> by bank transfer to Rothiemoon Farm 80-08-16, 00718868		<input type="radio"/> by bank transfer to Leedam Natural Heritage, 80-02-38 06006136, quoting ref: Dellifure+Yourname	

1st April 2021 - 31st March 2022

16. COVID-19 Test, Trace & Protect information

- Attendance at funerals is by invitation only.
- Please record and retain a list of names and contact information for all those invited.
- Appoint an 'usher' to check people in at the entrance using the list.
- Remind everyone to keep the required 2m distance.

The reason for this is to comply with Government requirements for Test, Trace, Protect information. These details should be made available to NHS should the need arise. A format for recording your funeral attendees is appended.

Your co-operation is much appreciated and helps us to keep you, your family, our staff and our country safe.

Confidentiality:

The information you record and give will be confidential and will only be used by NHS to contain the virus. It will not be shared with other bodies. All information will be held for 21 days after the service and then destroyed.

Declaration:

- I am the applicant, and I agree to share information on attendees directly with NHS should the need arise
- I am the applicant, and I agree that the Funeral Director can, on my behalf share the required information with NHS should the need arise
- I am the applicant, and I do not agree to share information on attendees but agree to be contacted by NHS should the need arise

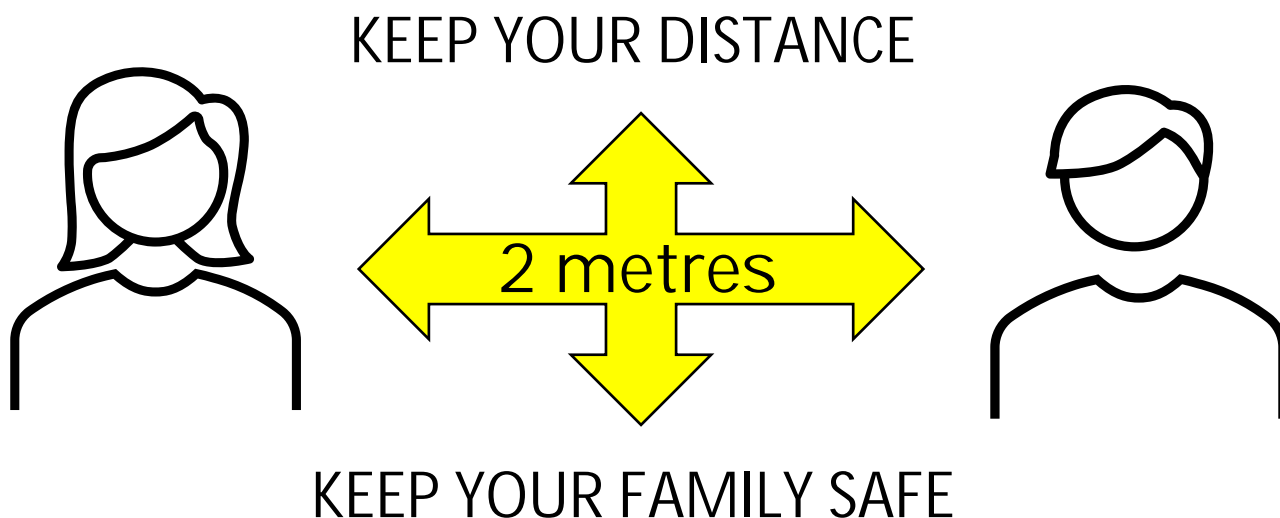
Funeral Director Co: _____ tel: _____

Applicant name: _____ tel: _____

Applicant signature¹: _____ date: _____

IMPORTANT

At a funeral it is understandably very difficult for people to maintain social distancing, however, we must do everything we can to minimise the risk of exposure to coronavirus.



¹ The Funeral Director may sign on behalf of the applicant under the following conditions:

- a) The document has been read and explained to the applicant and they understand what they are consenting to
- b) The full name and contact telephone number of the applicant is included

NHS Test/Trace/Protect Record

Delliefure natural burial ground

Date of service _____

Name	Tel
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Do not send this sheet to Leedam – Keep it for 21 days after the service, then destroy it.

NHS Test/Trace/Protect Record

Delliefure natural burial ground

Date of service _____

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Do not send this sheet to Leedam – Keep it for 21 days after the service, then destroy it.