



TRIM Reference: \_\_\_\_\_

# APPLICATION FOR THE TRANSFER OF A GRANT OF RIGHT OF BURIAL

\$ S S O L F D Q W

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Mobile Number : \_\_\_\_\_

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

Grave Details: Plot: \_\_\_\_\_ Row: \_\_\_\_\_ Number: \_\_\_\_\_

Name of Grant Holder: \_\_\_\_\_

Prior to Expiry

## DECLARATION

I hereby certify that as the Applicant for this renewal of the Grant of Right of Burial:

- ... I am the person in whose name the Grant was issued.
- ... I am the nominated by the original Grantee. See below
- ... I am the person authorised by the estate of the previous Grant holder to renew the Grant for this grave. Evidence required
- ... I am the person authorised by the Next of Kin to renew this Grant. See below

## PLEASE NOTE

If the original Grantee is not applying, this document is to be accompanied by a Statutory Declaration addressing the following points:

- x The reason the original grantee is not applying. (If the original grantee is alive, written consent must be given for renewal in another name).
- x The relationship of the applicant to the original grantee.
- x Certification that no other person with equal or greater interest in this grave

Z L O O R E M H F W W R W K H U H Q H Z D O R I W K H J U D Q W L Q W

Date: \_\_\_\_\_

\_\_\_\_\_  
Approved by Manager

