



 The Council Offices
Kingsbury Square
Wilton SP2 0BA

 01722 742093

 [Email the clerk](#)

 [Wilton TC Website](#)

Shaftesbury Road Cemetery



Notice of Interment (If more than one plot is required, please complete a separate form for each plot)

This form is to be delivered to the above address along with the Registrar's Disposal/Coroners Order for burial and grave papers at least 72 hours prior to the interment taking place (exclusive of Saturdays, Sundays and Bank Holidays). Please ensure that the information is set out accurately.

SECTION ONE: THE DECEASED

FULL NAME

LAST PERMANENT ADDRESS

PLACE OF DEATH

DATE OF DEATH

OCCUPATION

MARITAL STATUS

AGE LAST BIRTHDAY

SECTION TWO: THE FUNERAL

BURIAL DATE

BURIAL TIME

FUNERAL ARRIVAL TIME

NAME OF MINISTER

SECTION THREE: THE INTERMENT

TYPE OF GRAVE

New Grave

Complete 'Application form for Exclusive Right of Burial'

Pre-Purchased Grave

*Complete section 5a **and also** provide copy of existing Exclusive Right of Burial*

Existing Grave

Provide a copy of the Exclusive Right of Burial

Cremation Plot

*Complete section 5a **and also** provide copy of existing Exclusive Right of Burial **or** Complete 'Application form for Exclusive Right of Burial'*

For reopened graves

Section

Grave Number

Is there an existing headstone?

TYPE OF BURIAL

Coffin

Casket

Ashes Casket

Ashes (no Casket)

COFFIN / CASKET SIZE

Length

Width

Height

All measurements to be given at widest point.

SECTION FOUR: THE FUNERAL DIRECTOR

NAME OF FUNERAL DIRECTOR

EMERGENCY CONTACT

COMPANY

ADDRESS

TELEPHONE NUMBER

NAME OF GRAVE DIGGER

SIGNATURE

DATE

SECTION FIVE A: CONSENT FOR THE RE-OPENING OF A GRAVE FOR WHICH AN EXCLUSIVE RIGHT OF BURIAL HAS PREVIOUSLY BEEN PURCHASED

The Registered Owners(s) of the Exclusive Right of Burial must give permission for the burial by signing below. If the owner is deceased, the person arranging the funeral should complete this section.

I/We, the undersigned, hereby consent to grave [] being opened for the purpose of interring the late [].

(Please add additional pages if more than 3 applicants)

Owner One / Funeral Organiser

FULL NAME

ADDRESS

TELEPHONE

SIGNATURE AND DATE

Owner Two (if applicable)

FULL NAME

ADDRESS

TELEPHONE

SIGNATURE AND DATE

Owner Three (if applicable)

FULL NAME

ADDRESS

TELEPHONE

SIGNATURE AND DATE

SECTION FIVE B: PUBLIC GRAVES

I fully understand that the burial of the late [] will be in a grave in which other unrelated persons are, or may, be buried and that no headstone may be placed without the purchase of the rights to the grave.

FULL NAME

ADDRESS

TELEPHONE

SIGNATURE AND DATE

Purchase of Exclusive Rights Privacy Notice

(to be completed by each applicant on a separate copy of this page)

When you purchase the Exclusive Right to a single or double cemetery plot, the information you provide (personal information such as name, address, email address, phone number) will be processed and stored so that it is possible to contact you and to respond to your correspondence, provide information, send invoices and receipts relating to your burial plot/s. Your personal information will not be shared with any third party without your prior consent.

YOUR CONSENT

- I agree that I have read and understand Wilton Town Council's Privacy Notice. I agree by signing below that the Council may process my personal information for providing information and corresponding with me.
- I agree that Wilton Town Council can keep my contact information data for an undisclosed time or until I request its removal.
- I have the right to withdraw my consent and request that my details are removed from your database.

Name

Date of birth if under 18

Parental/Guardian consent is required for any data processing activity for U18s

Address

Telephone No.

Email Address

Signature

Date

For office use only:

Guidance Notes Data Sharing Checklist – systematic data sharing

Scenario: You want to enter into an agreement to share personal data on an ongoing basis is this form relevant and the sharing justified? Read the below:

Key points to consider:

What is the sharing meant to achieve?

Have you assessed the potential benefits and risks to individuals and/or society of sharing or not sharing?

- Is the sharing proportionate to the issue you are addressing?
- Could the objective be achieved without sharing personal data?

Do you have the power to share?

Key points to consider:

- The type of organisation you work for.
- Any relevant functions or powers of your organisation.
- The nature of the information you have been asked to share (for example was it given in confidence?).
- Any legal obligation to share information (for example a statutory requirement or a court order).

If you decide to share

It is good practice to have a data sharing agreement in place.

As well as considering the key points above, your data sharing agreement should cover the following issues:

- What information needs to be shared?
- The organisations that will be involved.
- What you need to tell people about the data sharing and how you will communicate that information.
- Measures to ensure adequate security is in place to protect the data.
- What arrangements need to be in place to provide individuals with access to their personal data if they request it?
- Agreed common retention periods for the data.
- Processes to ensure secure deletion takes place.

Date Data received	Date consent received and approved for data to be held	Data received as Phone, email, hard copy or other	Data approved to be shared with the below	Removal of consent received	Date data disposed of and method of disposal actioned