



## Craven Bereavement Services

The Chapel Office  
Skipton Crematorium  
Carleton Road  
Skipton

North Yorkshire BD23 3BT

[Bereavementservices.cra@northyorks.gov.uk](mailto:Bereavementservices.cra@northyorks.gov.uk)

[www.northyorks.gov.uk](http://www.northyorks.gov.uk)

# MEMORIAL CONSENT APPLICATION FORM

<b>New Memorial</b>		<b>Additional Inscription</b>		<b>Re-Fixing</b>		<b>Other (state)</b>	
---------------------	--	-------------------------------	--	------------------	--	----------------------	--

<b>Name and Address of Memorial Mason:</b>	
<b>Are you using an external memorial mason to fix the memorial YES / NO</b> You may be asked to provide a copy of their up to date NAMM/BRAMM Fixers Licence if they have not previously worked in our cemeteries	
<b>Name and Address of External Fixer:</b>	

<b>Name of Deceased:</b>			
<b>Cemetery</b>		<b>Grave Number &amp; Section:</b>	

<b>Full Name of Applicant:</b>			
<b>Address:</b>			
		<b>Post Code:</b>	
<b>Email Address:</b>		<b>Telephone No:</b>	

### Please read these conditions carefully – applies to all new memorials

The Right to Erect for new memorials is for a period of 30 years only, (on existing memorials the Right to Erect period remains as per the original agreement) and is subject to a 5 years memorial inspection. Any subsequent repairs to the memorial to maintain it in a safe condition will be carried out at the sole discretion of the Council at the memorial owner's expense, using a mason registered with the Council. If this is not undertaken then the Right to Erect is terminated and the memorial could be removed by the Council. Where a memorial is found to be unsafe or in need of repair the Council will write to the memorial owner. It is important therefore that the memorial owner notifies Bereavement Services of any change of address. A reminder will be sent out to the memorial owner when the 30 year period is near to expiry. The period may at this point be extended.

The memorial may be required at any time to be fully dismantled to ensure that a correct and safe method of erection was used. It will be fully reinstated once this has been done. No expense will be passed to the memorial owner.

**Conditions applying to all types of memorials fixed or re-fixed in the Cemeteries.**

The memorial mason will provide a minimum 10 year fixing guarantee that covers the memorial subject to conditions and will issue this at the time of application. Full details are described in the Council's Rules and Regulations Governing Memorials.

The applicant's signature is required below **FOR ALL TYPES** of memorial work being done, whether it is for a new memorial or one to be re-fixed. It is important that the Applicant **FULLY UNDERSTANDS** the conditions over before signing.

Signature of Applicant:		Date:
-------------------------	--	-------

***This must be the grave owner or the memorial must be in memory of the grave owner, otherwise a transfer of burial rights will need to be completed.***

Please detail below or attach a drawing of the proposed memorial including correct dimensions and fixing methods.

We welcome individual memorials in our cemeteries; please contact us directly if you feel your memorial might be unique to ensure it meets with our Rules and Regulations.

<b>Proposed Inscription / Work to be carried out, including fixing method</b>
<b>Material and finish of proposed memorial</b>
<b>Sketch of proposed memorial showing dimensions and foundation Or please confirm it is attached on a separate sheet.</b>

I understand and will abide by the Council's Rules and Regulations Governing Memorials, and all fixings and installations etc will be in accordance with NAMM's current Code of Working Practice. I will also give 24 hours' notice prior to installation. I am licensed by the Council.

Memorial Masons Signature:		Date:
-------------------------------	--	-------

Please make cheques payable to "NORTH YORKSHIRE COUNCIL"

<b>OFFICE USE</b>	
Consent to Place a Memorial	£
Consent for Additional Inscription	£
Consent for Kerbs	£
Misc	£
<b>TOTAL DUE:</b>	<b>£</b>
Date Paid:	Receipt / Invoice Number:
BACAS ID Number:	Date Entered on BACAS:
Permit Number:	Memorial Checked:
Additional Information:	



### Craven Bereavement Services

The Chapel Office  
 Skipton Crematorium  
 Carleton Road  
 Skipton  
 North Yorkshire BD23 3BT  
[Bereavementservices.cra@northyorks.gov.uk](mailto:Bereavementservices.cra@northyorks.gov.uk)  
[www.northyorks.gov.uk](http://www.northyorks.gov.uk)

**PERMIT No:** .....

Cemetery:		Grave Section & Number	
Fee:		Invoice No / Receipt No:	
Approved By:			Date:
Shoe supplied by Council	Yes	No	

You must notify the Council at least 24 hours prior to carrying out any works. If carrying out works at Waltonwrays Cemetery this permit must be presented at the office and then signed immediately after fixing. If fixing at Ingleton Cemetery please forward this completed permit as soon as possible after fixing.

The memorial has been fixed according to Permit Number: .....

Memorial Mason's Signature:		Date:
-----------------------------	--	-------