

CLIPSTONE CEMETERY

Name and address of applicant and <u>relationship to the deceased</u>	Name and address, telephone and email of funeral director
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This form MUST be fully completed and received at Clipstone Parish Council's correspondence address AT LEAST 3 CLEAR (not incl. day of receipt and day of funeral) WORKING DAYS PRIOR TO THE FUNERAL SERVICE. Please note that if this form is either not fully completed or received by the time stated, the burial may be delayed.

INTERMENT DETAILS	
Date & Time of Burial	Date: Time:
Full Name of Deceased (Mr, Mrs, Miss, Other)	
Age of Deceased	
Date of Death/Marital Status	/
Last permanent address (If the deceased took up residency outside the Parish Council's area within the last 6 months or has moved straight into a Nursing Home outside the area from an address within the Parish Council's area, then please also give former address as this affects fees.)	
Type of Service	Direct to Grave YES / NO Graveside YES / NO
Name of Person Officiating	
Religion of Deceased if appropriate	
Grave Number/Type Traditional/Lawn/Cremated Remains	
SIZE – please specify the following Please give an accurate coffin lid size so we can make the necessary adjustment for grave size.	Coffin / Casket / Cremation Casket Outside measurement – length _____ Outside measurement – width _____ Outside measurement – depth _____ (include allowances for handles)
Depth of Grave required (Please note that although best endeavours will be made to ensure that the requested depth is achieved, this may not be possible due to coffin/casket sizes and/or ground conditions.)	
Special Interest – Please indicate whether horse drawn / bugler / bagpipes etc. that might impact on others in the cemetery.	

APPROVED by Burial Authority

Signed

DATE

Please turn over

Please return completed form to: **The Clerk, Clipstone Parish Council, The Village Hall, Church Road, Clipstone Village, Mansfield, NG21 9DF** or return a scanned and signed copy to:
cemetery@clipstoneparishcouncil.org

CLIPSTONE CEMETERY

APPLICATION FOR THE PURCHASE OF A PRIVATE GRAVE

I wish to purchase the Exclusive Right of Burial to a new existing grave in Clipstone Cemetery and understand that my Rights will exist for a period of 50 years. Any new plot will be allocated by the cemetery administration.

I confirm that I have received a copy of the Rules and Regulations governing Clipstone Parish Council Cemetery and will comply with them.

Signed _____ Dated _____

Full Name of Applicant (PLEASE PRINT)	Mr / Mrs / Ms
Telephone No:	
Email:	
Full address (PLEASE PRINT)	

OFFICE USE ONLY

Burial No.		Plot Number:	
Deed No.			
Invoice No.		Amount	

PLOT:

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Purchase of Exclusive Rights Privacy Notice

When you purchase the Exclusive Right to a single or joint 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.

I agree that I have read and understand Clipstone Parish Council 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 Clipstone Parish Council can keep my contact information data for an undisclosed time or until I request its removal after the termination of this contract.

I have the right to request modification on the information that you keep on record.

Name	
Date of birth if under 18	
Parental/Guardian Consent for any data processing activity	
Address	
Telephone No.	
Email Address	
Signature	
Date	

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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

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