



Application for a Memorial Seat

Norfolk Seat Woodland Seat

Title of Applicant Mr Mrs Miss Other:

Name (in full)

Address

.....

Post CodeTel

I hereby request Hastings Borough Council to grant the right to donate a Memorial Seat to a designated location in the Cemetery & Crematorium grounds for a minimum period of ten years to the memory of:

.....

Inscription (up to a total of 30 letters or figures please)

.....

.....

.....

I understand the terms of the memorial seat scheme. All rights to a memorial space shall cease at such time after the tenth anniversary of the application or when the seat becomes unsafe for whatever reason. The Applicant will be responsible for any maintenance and the repair of damaged seats unless vandalised beyond use. The acceptance by the Council of this application does not confer any property rights or privileges. The manager reserves the right to vary or refuse an unsuitable inscription. I agree to abide by the terms of the memorial seat scheme and the rules and regulations of the Cemetery & Crematorium as approved by Hastings Borough Council.

SignatureDate

Please note the appropriate donation fee should accompany each application. Cheques should be made payable to Hastings Borough Council. Please refer to enclosed pricelist.

For Office Use

Fee £ Receipt Card No

Crem No Location Order

Date Received Notified