ROTHER DISTRICT COUNCIL

Application for Permission to Erect a Memorial

BOTH SIDES OF THIS APPLICATION MUST BE PROPERLY COMPLETED AND DELIVERED TO: ROTHER DISTRICT COUNCIL, THE CEMETERIES OFFICE, TOWN HALL, BEXHILL-ON-SEA, EAST SUSSEX TN39 3JX OR BY EMAIL TO: cemeteries@rother.gov.uk. Tel. 01424 787523

Work must not commence until permission to proceed is obtained

FEES TO BE PAID WITH APPLICATION

Secti	ion 1			
1.	Name of Deceased:			
2.	Cemetery: Bexhill/Rye			
3.	Division:	Section:	Letter and No:	
4.	Type of Memorial:*			
		*insert here the type o	memorial, e.g. Headstone, kerb, Additional Inscrip	tion
5.	<u>Dimensions</u>	6. Proposed I	<u>nscription</u>	
Heigh Width Depth Base	n: h:			
Heigh Width Depth	n:			
Kerb Heigh Width Depth	n:	7. Proposed I	<u>Embellishments</u>	
Full N	Name of Owner: (Block Cap	itals)		
Signature of Owner:			Date:	
Addre	ess of Owner:			
Signature of Mason:		Date:		
Name	e and Address of Mason:			

For Office Use Only				
Date Received		Fee Payable		
Approval Number		Date Fee Paid		
Grant Number		Receipt No.		

<u>Section 2</u> – Please use the space below for an illustration/picture of the proposed memorial.					
Section 3 –					
DATA PROTECTION ACT 2018					
Please note that the Data Controller, as defined in the UK GDPR and Data Protection Act 2018, is Rother District Council. The information, which you provide, will enable the Council to exercise its authorised powers relating to the Acts and regulations governing cemeteries.					
The Council's Cemeteries Officer may disclose this information to Monumental Masons and Funeral Directors as considered necessary.					
Please confirm your agreement by signing below:					
Signed:					
Date:					