

Application to purchase exclusive right of burial – The Memorial Terrace

Name:	Date of birth:
Name:	Date of birth:
Address:	
Telephone number:	
Signature:	Date:
Signature:	Date:
Plot number(s):	Type of facility:
Length of Lease (please tick as req	uired): \square 50 years \square 75 years
Proof of residence seen: \Box	
Please note that the maximum size wide and 21 inches deep (including	e of a coffin or casket is 84 inches long, 30 inches g handles).
To confirm the prices please conta cemeteries@bexley.gov.uk.	ct the cemetery office on 020 3045 4100 or email
Please return this form with a chec	que made payable to London Borough of Bexley to:
The Cemeteries Office Civic Offices 2 Watling Street Bexleyheath Kent DA6 7AT	
	y card and we will telephone you to take payment.
For office use only	
Receipt No:	
Amount:	
Date Paid:	