



THE DIOCESE OF LEICESTER

RESERVATION OF A GRAVE SPACE IN A CHURCHYARD

PARISH OF.....

This form sets out the details required by the Diocesan Registrar to enable her to prepare a Petition for a Faculty for consideration by the Diocesan Chancellor.

Please also see the Diocesan Registry's guidance note: applying to reserve a grave space.

Please complete **PART A** and then ask the Incumbent (i.e. the priest of the church in whose churchyard the grave space is to be reserved) or the Churchwardens to complete **PART B**.

Don't forget to sign and date the form at the end of **PART A** and to ask the Incumbent or Churchwarden to sign and date the form at the end of **PART B**.

You then need to return the completed form with the fee (**currently £317 cheques to be made payable to "Stone King LLP"**) to:

Mr L Coley, Diocesan Registrar
c/o Stone King LLP
Boundary House
91 Charterhouse Street
London EC1M 6HR

If you would like send the completed form and/or the payment electronically, please contact registry@stoneking.co.uk

PLEASE NOTE: the sum of £200 may also be payable to the parochial church council (PCC) as a one-off contribution to maintenance of the churchyard. Please ask the Incumbent or Churchwardens about this.

PART A

Information to be supplied by the Applicant

(The person for whom the grave space is to be reserved)

1. Full name:
2. Address:
3. Email address:
4. Date of birth:
5. Do you live in the parish where you would like to reserve the grave space?
6. Are you on the parish church electoral roll?
7. Do you attend the parish church in whose churchyard you wish to reserve a grave space?
8. Are you a regular giver to the parish church?
9. Do you own property in the parish? If so, please provide details.
10. Do you have a relative buried in the churchyard? If so, please provide your relative's:
Full name:
Relationship to you:
Date of burial:
If known, please describe the position of your relative's grave:
11. Do you have any other connection with the church? If so, please give details.

12. Is this an application for a **DOUBLE-DEPTH** grave space (i.e. to fit two persons)? If so, please complete the following in respect of the other person for whom the grave space is to be reserved

Full name:

Address:

Date of birth:

Relationship to you:

13. Other than in the circumstances referred to in 12, are you making this application on behalf of another person?

NOTE: *An application for reservation of a grave space cannot be made on behalf of a third party except: (1) if made by a person for his or her wife/husband; or (2) made on behalf of a person who is a registered blind person or a person unable to make an application due to age or infirmity.*

If so, please provide your own details.

Full name

Address

Date of birth

Reason why the other person cannot apply (e.g. age, infirmity *etc.*):

Signature of Applicant:

Date:

If applicable:

Signature of person named in paragraph 13 above:

Date:

PART B: Information to be supplied by Incumbent or Churchwardens.

1. For how many years do you think the space in the present churchyard will fulfil the needs of Parishioners?

If the answer to question 1 is less than five years, does the PCC have any plans to extend the churchyard?

2. Does the PCC support this application?

If so, please give reasons:

Please attach to this form a copy of the relevant PCC resolution, indicating whether passed unanimously or by a majority (with voting figures and total number of members of the PCC).

3. What is the population of the parish?
4. What are the numbers of grave spaces now available for future burials?
5. Please give the average yearly number of burials in the churchyard for the last 3 years.
6. Please describe the position of the grave space to be reserved either by reference to a number on the plan of the Churchyard or by a description of its position
7. What will be the number of this reservation in the Register of Reservations kept by the PCC?

Signature of Incumbent or churchwarden:

Date: