Environment Section, Kildare County Council, **Application Form for**

Áras Chill Dara, Devoy Park, Naas, Co. Kildare **Burial Plot / Interment**

W91 X77F

Phone: 045 980588 **Please submit to the**

Email: [environcemeteries@kildarecoco.ie](mailto:environcemeteries@kildarecoco.ie) **Cemetery Caretaker**

**BEFORE interment**

**Please ensure compliance with Kildare County Council’s (Cemeteries) Byelaws 2018**

**Details of Burial Plot** Name of Cemetery: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Address of Burial Plot Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**New:** Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_ **Existing:** Section:\_\_\_\_ Row:\_\_\_\_ Plot No:\_\_\_\_\_

* Single / Double / Ash / Angel / Columbarium Wall

**Details of Interment**

Name & Address of Deceased: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Death: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: \_\_\_\_\_\_\_\_

Proposed Date of Interment: **\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_** Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Adult / Child / Ashes

**Information Provided by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* Name of Funeral Director / Family Member

**Office Use D**ate Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Financial Details | | Amount | Date Received | Receipt Number | Date Lodged |
| Date of Interment |  |  |  |  |  |
| Plot Type |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Plot Details | | Comments:  Caretaker’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Section |  |
| Row |  |
| Plot Number |  |
| Wall Number |  |
| Register Details | |
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