|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MEMORIAL PLAN APPLICATION**  **Fees applicable from 01 April 2025 to 31 March 2026**   * **This application must be completed and sent with full payment, a plan, copy of the Deed\*, copies of BRAMM/NAMM Certificate and Public Liability Insurance Certificate (to the value of £5 million)**   **From 2006 all new memorials will be lawn type only** | | | | | | | | | | | | |
| **From:** |  | | | | | | | **To:** | **Ceredigion County Council**  **Highways and Environmental Services**  **Canolfan Rheidol**  **Rhodfa Padarn**  **Aberystwyth**  SY23 3UE | | | |
| **Date:** |  | | | | | | |  |  | | | |
|  | | | | | | | | | | | | |
| **Deceased’s Name and Address:** | | | | |  | | | | | | | |
| **Name/Address/Telephone No of Deed Holder (\*please attach a copy of the Deed)** | | | | |  | | | | | | | |
|  | | | | | | | | | | | | |
| **Grave No:** | |  | **Section:** | | |  | | | | **Cemetery:** |  | |
|  | | | | | | | | | | | | |
| **Masons Name and Address (please enclose a copy of the guarantee and details of ground fixing method on the reverse)** | | | | | |  | | | | | | |
|  | | | | | | | | | | | Tick box | |
| **Type of Memorial** | | **Existing Graves** | |  | | | | | | |  | |
|  | | Headstone or Cross not exceeding 1**.**200m in height on graves. | | | | | | | | |  | **£340.00** |
|  | | Headstone or Cross not exceeding 0.600m in height on plots with cremated remains.  **Note**: Section D (Ashes), Cefn Llan Cemetery. The stone size will not exceed a 600 x 600mm base with a 460mm x 460mm inscribed stone placed on it. | | | | | | | | |  | **£340.00** |
|  | | Additional Inscription per headstone. | | | | | | | | |  | **£85.00** |
| **The above measurements are flexible to a small degree.** | | | | | | | | | | | **TOTAL** |  |
|  | | | | | | | | | | |  | |
| Grave No and Section must be engraved on the back of every gravestone. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Please provide overleaf a simple plan of the memorial and the inscription.  The Council reserves the right to refuse any memorial design. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Signature of Owner / Memorial Mason:** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **FOR OFFICE USE ONLY** | | | | | | | **Approved by:** | | | | | |
|  | | | | | | | | | | | | |

Receipt Number Issued …………………

Date of Issue ………………