

INDEMNITY

I, *Mr / Mrs / Miss
(insert full names)

of
(insert address)

REQUEST THURROCK COUNCIL TO TRANSFER the Exclusive Right of Burial of
Grave No. Section at **Cemetery**, from *(previous
owner being deceased).....

to:
(insert full names)

of
(insert address)

I declare that I am not the owner of the Exclusive Right of Burial and do not know of any person who is the owner. I declare I do not know of the whereabouts of the original grant of Exclusive Right of Burial, or any will, testamentary disposition or deed of gift by which the grant may have been transferred.

In consideration of the THURROCK COUNCIL granting this application, I agree to indemnify the Council against any costs, claims or damages arising out of the transfer of the Exclusive Right of Burial. In addition, I am aware of the Regulation or Byelaws in force at date of Application.

Signature Date

For Office Use Only

Fees Received _____ Date: _____
Receipt No: _____ ERB No: _____

* Please delete as applicable