

CONSENT FOR CHANGE OF NAME OR ADDRESS

Please update your records for:

Grave Space Reference:

Cemetery:

I confirm that I am the current Grave Grant Owner of Exclusive Right of Burial of the grave space aforementioned.

Signed:

Print Name:

Address:.....

.....

Telephone No:

Email Address:

Previous Address (if applicable):

.....

Previous Name (if applicable):

Please include a copy of photographic ID (either passport or driving Licence) as proof of identity.

If you have had a change of name due to marriage or by Deed poll, please include a copy of the change of name document for our records.

Once our records have been amended, you will receive a new Grave Grant through the post.

**Please return this form once completed to:
North Herts Council, PO Box 10613, Nottingham, NG6 6DW.**