



**ELING CEMETERY VISITOR'S PERMIT 2019 - 2020
TERMS AND CONDITIONS OF USE**



1. The permit will be valid from 1 April 2018 to 31 March 2019 & renewable annually – new applications to be made in person. **Applications can be posted but permits need to be collected in person from the Civic Centre, Totton, SO40 3AP.**
2. Permits are issued to those residing in the Totton and Eling Town Council district but also dependent on distance from applicant's property to tollbridge.
3. The permit is available to the next of kin of those buried in Eling Cemetery. (Maximum of two permits per grave will be issued)
4. The permit is valid between the following charging times:-
10:00 a.m. – 4:00 p.m. Monday to Friday inclusive. Time restrictions do not apply at Weekends and Bank Holidays. **Can be used a maximum of twice a week. T & ETC has discretion to vary frequency on receipt of formal written request.**

Please send or bring completed applications to:-Totton & Eling Town Council, Civic Centre, Totton, SO40 3AP. Permits will be left in reception for collection once application is approved.



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**APPLICATION FOR ELING CEMETERY VISITOR'S PERMIT 2019 – 2020
Please complete ALL sections below**

RENEWAL **NEWAPPLICATION**
 SURNAME: _____ INITIAL: _____ (MR/MRS/MISS/MS)
 (BLOCK LETTERS)
 ADDRESS: _____
 _____ POSTCODE: _____
 TEL NO: _____ VEHICLE REG _____
 NAME OF DECEASED: _____
 YOUR RELATIONSHIP TO DECEASED: _____
 DATE OF INTERMENT: _____ GRAVE NO: _____
 LOCATION OF GRAVE: NEW CEMETERY OLD CEMETERY CHURCHYARD please tick

I understand the terms relating to my application for an Eling Cemetery Visitor's Permit and I agree to comply with the conditions of use.

SIGNATURE: _____ DATE: _____

Data Protection Act 1998
The information you provide will be held in accordance with the Data Protection Act 1998 and will not be used for any purpose that is not compatible with the purpose for which it was collected. The details you have provided may be verified with other Council records to confirm local residency.

FOR OFFICE USE ONLY DATE: _____ INITIALS: _____ PERMIT No _____