

- Please read the following terms & conditions before signing the declaration below:
- 1 Upon payment of the necessary fee, the dedication will be for an initial period of 10 years from the date of payment.
 - 2 The dedication period may at the Council's discretion be renewed on expiry subject to the regulations then in force and payment of the relevant renewal fee.
 - 3 Further inscriptions and placement of cremated remains will be at additional cost as applicable at that time.
 - 4 Where there is no renewal and the dedication period has expired the Council reserves the right to remove any cremated remains from within the niche. The registered person (you) will be contacted in writing at the last known address held in our records to advise you of this, and where no response is received within 28 days the Council will scatter the remains within the crematorium grounds. The tablet remains the property of the Council.
 - 5 The Council reserves the right to remove any unauthorised items in the vicinity of the tablet or Cloister Garden.

I agree to the terms above:

Full Name (print): Mr/Mrs/Miss/Ms: _____

Address: _____

Home phone: _____ Mobile: _____

E-mail: _____

Signature: _____ Date: _____

Please send completed forms to Benhall Mill Road Royal Tunbridge Wells Kent TN2 5JJ

For Office Use Only

Cremation number:	Agreement number:
Receipt number:	Application date:
Plaque type:	Order date:
Received:	Fixed:
Lease end date:	Notification Letter sent:

- Please read the following terms & conditions before signing the declaration below:
- 1 Upon payment of the necessary fee, the dedication will be for an initial period of 10 years from the date of payment.
 - 2 The dedication period may at the Council's discretion be renewed on expiry subject to the regulations then in force and payment of the relevant renewal fee.
 - 3 Further inscriptions and placement of cremated remains will be at additional cost as applicable at that time.
 - 4 Where there is no renewal and the dedication period has expired the Council reserves the right to remove any cremated remains from within the niche. The registered person (you) will be contacted in writing at the last known address held in our records to advise you of this, and where no response is received within 28 days the Council will scatter the remains within the crematorium grounds. The tablet remains the property of the Council.
 - 5 The Council reserves the right to remove any unauthorised items in the vicinity of the tablet or Cloister Garden.

I agree to the terms above:

Full Name (print): Mr/Mrs/Miss/Ms: _____

Address: _____

Home phone: _____ Mobile: _____

E-mail: _____

Signature: _____ Date: _____

Please send completed forms to Benhall Mill Road Royal Tunbridge Wells Kent TN2 5JJ

For Office Use Only

Cremation number:	Agreement number:
Receipt number:	Application date:
Plaque type:	Order date:
Received:	Fixed:
Lease end date:	Notification Letter sent:



CREMATORIUM MEMORIAL
CLOISTER GARDEN - WALL NICHE



CREMATORIUM MEMORIAL
CLOISTER GARDEN - WALL NICHE



Payment is required by card over the telephone on 01892 523894 or in person at the Crematorium office.



Payment is required by card over the telephone on 01892 523894 or in person at the Crematorium office.



CLOISTER GARDEN - WALL NICHE

Guidelines for completing the first Inscription of the tablet:

- 1 Please write in BLOCK CAPITALS with only one letter, number or character per box, and don't forget to include spaces in your text. Importantly please also remember to ensure enough lines remain for a second inscription.
- 2 Name text will be in a large typeface therefore only 18 characters are permitted (see the dotted line)
- 3 If you require an illustration or photo plaque do not use the grey shaded boxes. Alternatively if you wish for a more bespoke design please contact the crematorium office for assistance.
- 4 This guide box is only to aid your choice of inscription, our manufacturers will centre the text on the tablet.
- 5 Please do not use the blacked out boxes as these represent where screw fixings will be made.

Please state the name of the deceased: _____

[illegible]

CLOISTER GARDEN - WALL NICHE

Guidelines for completing the first Inscription of the tablet:

- 1 Please write in BLOCK CAPITALS with only one letter, number or character per box, and don't forget to include spaces in your text. Importantly please also remember to ensure enough lines remain for a second inscription.
- 2 Name text will be in a large typeface therefore only 18 characters are permitted (see the dotted line)
- 3 If you require an illustration or photo plaque do not use the grey shaded boxes. Alternatively if you wish for a more bespoke design please contact the crematorium office for assistance.
- 4 This guide box is only to aid your choice of inscription, our manufacturers will centre the text on the tablet.
- 5 Please do not use the blacked out boxes as these represent where screw fixings will be made.

Please state the name of the deceased: _____

[illegible]