



# MEMORIAL PLAQUE APPLICATION FORM

## APPLICANT'S DETAILS

Full Name .....

Address .....

Postcode ..... Tel No .....

*I have read the conditions in the information leaflet and agree to its content and understand it is my responsibility to inform the Council of my change of address or details.*

Signed ..... Date .....

## 3 LINE PLAQUE

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
Line 1																									
Line 2																									
Line 3																									

### OPTIONS FOR A THREE LINE PLAQUE

OLD GARDEN	Years	Fee - £	NEW GARDEN	Years	Fee - £
PLANTER – red/relief			PLANTER – red/relief		
WALL – black/relief			WALL – red/relief		
WALL – black/gold			WALL – black/relief		
			WALL – black/gold		

**Please note:- Do not forget to include the spaces in your inscription. The inscription must be clearly written in BLOCK CAPITALS. The blocked out areas allow for the fixing holes.**

## 6 LINE PLAQUE

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
Line 1																									
Line 2																									
Line 3																									
Line 4																									
Line 5																									
Line 6																									

### OPTIONS FOR A SIX LINE PLAQUE

OLD GARDEN	Years	Fee - £	NEW GARDEN	Years	Fee - £
WALL – black/relief			WALL – red/relief		
WALL – black/gold			WALL – black/relief		
			WALL – black/gold		

## REPLACEMENT PLAQUE

Is this a replacement plaque?	Yes/No	If so, would you like the old plaque returned?	Yes/No
Collected by (print name)		Signature	Date

## METHODS OF PAYMENT ARE SHOWN OVERLEAF

### FOR OFFICE USE ONLY

Receipt No:		Date:		Fixed Location		No of Years	
Amount:		Order No		Fixed Date:		Expiry Date	

## METHODS OF PAYMENT

### CASH, CHEQUE, CREDIT CARD, DEBIT CARD, POSTAL ORDER OR GIRO

**In person** – Register Office, Houndgate, Darlington

Monday – Thursday            9.00am – 4.30pm

Friday                            9.00am – 4.00pm

**By post** - Payment should be made by crossed cheque or postal order and payable to Darlington Borough Council. If credit card payment is preferable then please complete the form below. Completed applications can then be posted to:

**Cemetery & Crematorium Manager, Register Office, Houndgate, DARLINGTON DL1 5RF**

### PAYMENT BY CREDIT OR DEBIT CARD

*(please complete the following)*

Please debit the sum of £ ..... from the following credit/debit card account.

Mastercard		Visa		Delta		Switch	
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Issue Number		Expiry Date		*Security Code	
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\*Last 3 digits on signature strip

Card No.																			
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## FOR OFFICE USE ONLY

<b>Receipt No:</b>	<b>Date Paid:</b>	<b>Cremation No:</b>
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