



# Almond Lane Cemetery

## Memorial Wall Application Form

Return to:

Cemetery Office  
Cavendish Road  
Stevenage  
Herts. SG1 2ET

Tel No. 01438 367109  
Email: [cemeteries@stevenage.gov.uk](mailto:cemeteries@stevenage.gov.uk)

Please supply a plaque and container for the Memorial Wall in the Rose Garden at the Almond Lane Cemetery.

Full Name of Deceased: .....(BLOCK CAPITALS)

Date of Birth:..... Date of Death:..... Plot No: .....

### Name and address of person requesting a position on the Memorial Wall

Mr / Mrs / Miss / Ms.....

.....Postcode: .....Telephone No: .....

Email:.....Date: .....

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1. Change of Address – please notify the Cemetery Office at the address or telephone number above if you have moved
  2. The fee for this plaque and container for a period of 5 years is £44.00
  3. Cheques should be made payable to Stevenage Borough Council

Our Privacy Policy has been updated to reflect changes to data protection legislation and can be viewed at the following link <https://www.stevenage.gov.uk/privacy-policy>

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### For Office Use Only

Plot No:..... Container No:.....

Fee: ..... Date:..... Receipt No:.....

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