



Weston Road Cemetery Memorial Wall Application Form

Return to:

Cemetery Office
Cavendish Road
Stevenage
Herts. SG1 2ET

Tel No. 01438 367109
Email: cemeteries@stevenage.gov.uk

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

Full Name of Deceased:(BLOCK CAPITALS)

Year of Birth:..... Year of Death:..... Plot No:

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

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

Address: 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 £40.50
 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 <http://www.stevenage.gov.uk/privacy-policy>

For Office Use Only

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

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