



Weston Road Cemetery

Memorial Wall Application Form

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)

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

Name and address of the 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 contact the Cemetery Office if you have moved
 2. The fee for this plaque and container for a period of 5 years is £55.00
 3. Payment can be made in the following ways:
 - **Card Payment**
Please phone 01438 367109 to make a card payment over the phone.
 - **By Cheque**
Please make your cheque payable to Stevenage Borough Council and forward with the form to: Stevenage Borough Council, Cavendish Road, Stevenage, SG1 2ET
 - **By Bank Transfer**
Account Name: Stevenage Borough Council
Bank: HSBC Bank plc
Account number: 11549200
Sort Code: 40 43 36

Return to: Stevenage Borough Council, Cavendish Road, Stevenage, SG1 2ET
Tel No. 01438 367109 Email: cemeteries@stevenage.gov.uk

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:.....