

Advanced Plot Reservation - The Natural Burial Company

Please Complete in block capitals

Full Name of Applicant	
Address	
Telephone Number(s)	
Email Address	

If Grave is not for the Applicant

Name	
Address	
Relationship to Applicant	

Name of Burial Ground	
Full or Cremated Remains Plot	
If Cremated Remains, number of Plots Required	
Plot Number (if known)	

I, being the applicant have read, understood, and agree to abide by the *Regulations of The Natural Burial Company*. Particularly those appertaining to the placement of Memorials and Flowers on graves.

I furthermore understand that the view from my plot(s) may change over time due to tree planting, additional burials, and maturing of the natural burial ground.

Signature of Applicant **Date.....**

For Internal use only.

NBC:

Map:

Licence Issued: