



Barrowby Parish Council

Email: clerk@barrowbyparishcouncil.gov.uk

Address: Reading Room, Church Street, Barrowby, NG32 1BX

Website: <https://barrowby.parish.lincolnshire.gov.uk>

Application for Additional Grantees to a Grant of Exclusive Right of Burial

Important:

This form must be completed where there is a request to:

- add a grantee to an existing Grant of Exclusive Right of Burial;
- remove a grantee from an existing Grant of Exclusive Right of Burial; or
- transfer the Grant of Exclusive Right of Burial to a new grantee or grantees.

The Council must be satisfied that the applicant is entitled to request the change before any amendment is made to the register or deed.

Please complete this form in block capitals and provide all supporting documents requested.

Section 1 – Applicant Details

Name of applicant: _____

Address: _____

Telephone: _____

Email: _____

If more than one applicant, please list all applicants on a separate sheet

Section 2 – Grave and Grant Details

Grant Number:

Grave / Plot Number:

Name of deceased buried in grave (if applicable):

Date grant originally issued (if known):

Section 3 – Type of Application

Please tick one:

Add additional grantee(s)

Remove existing grantee(s)

Transfer to new grantee(s)

Update details following death of grantee

Other: _____

Please explain briefly what change is requested:

Section 4 – Existing Registered Grantee(s)

Please list all current registered grantees shown on the existing grant / burial register.

Existing Grantee 1

Full name: _____

Address: _____

Telephone: _____

Email: _____

Existing Grantee 2

Full name: _____

Address: _____

Telephone: _____

Email: _____

Existing Grantee 3

Full name: _____

Address: _____

Telephone: _____

Email: _____

(Continue on a separate sheet if necessary.)

Section 5 – Proposed New / Remaining Grantee(s)

Please state who the grantee(s) should be after this application is completed.

Proposed / Remaining Grantee 1

Full name: _____

Address: _____

Time at this address: _____

Telephone: _____

Email: _____

Proposed / Remaining Grantee 2

Full name: _____

Address: _____

Time at this address: _____

Telephone: _____

Email: _____

Proposed / Remaining Grantee 3

Full name: _____

Address: _____

Time at this address: _____

Telephone: _____

Email: _____

(Continue on a separate sheet if necessary.)

Section 6 – Reason for Application / Authority to Apply

Please tell us why you are entitled to request this change to the Grant of Exclusive Right of Burial.

Tick all that apply:

I am the current registered grantee

I am one of the current joint grantees

I am the executor of a deceased grantee's estate

I am the administrator of a deceased grantee's estate

No probate has been obtained, but I am the next of kin / person dealing with the estate

I have the written consent of all current grantees

Other (please explain): : _____

Where the applicant is an executor or administrator acting under a Grant of Probate or Letters of Administration, this form may also operate as the Council's record of assent or transfer of the Exclusive Right of Burial, subject to the Council being satisfied as to entitlement.

Section 7 – Has a Registered Grantee Died?

Yes

No

If yes, please complete below:

Full name of deceased grantee: _____

Date of death: _____

Was the deceased grantee the sole holder or a joint holder?

Sole

Joint

Did the deceased leave a will?

Yes

No

Unknown

Has Probate or Letters of Administration been obtained?

Yes

No

If yes, state the name(s) of executor(s) / administrator(s) and complete Section 9:

Section 8 – Route of Application / Supporting Evidence

Please tick the route that applies and attach the relevant documents.

A. Living grantee(s) consenting

Signed consent of all current grantees

Proof of identity for all signing parties

Existing deed / grant (if available)

B. Transfer following death / Assent following death – Probate / Letters of Administration route

Copy death certificate of deceased grantee

Grant of Probate

or

Letters of Administration

Copy of will (if applicable)

Assent by executor / administrator, if the application is being made to transfer the burial rights to a beneficiary or other entitled person

Proof of identity for executor / administrator

Existing deed / grant (if available)

C. Transfer following death – Statutory Declaration route

- Copy death certificate of deceased grantee
- Statutory Declaration
- Details of all persons entitled or potentially interested
- Written consent from all relevant persons (if applicable)
- Proof of identity for applicant(s)
- Existing deed / grant (if available)

D. Other

Please state what supporting documents are enclosed:

Section 9 – Executor / Administrator Details

(Complete if applicable)

Name of executor / administrator:

Address:

Telephone: _____

Email: _____

Capacity:

Executor

Administrator

Attorney

Other: _____

Section 10 – Consent of All Holders / Interested Parties

All existing grantees must normally consent to the proposed change.

Where a grantee is deceased, the Council may require consent from the executor(s), administrator(s), or all persons entitled.

Please confirm:

I confirm that all current living grantees have signed this form or have provided written consent.

I confirm that all persons with legal entitlement have been notified and have consented.

I understand that the Council may refuse to amend the register until all required consents have been received.

If consent has not been provided by all relevant persons, please explain why:

Section 11 – Applicant Declaration

I / We apply for the amendment of the Grant of Exclusive Right of Burial as set out in this form.

I / We declare that:

- the information provided is true to the best of my / our knowledge and belief;
- I / we have the authority or entitlement to make this application;
- I / we understand that knowingly providing false information may invalidate this application;
- I / we understand that the Council may request further documents before determining this application;
- I / we understand that no amendment will take effect until the Council has updated the burial register and, where applicable, issued an amended deed or written confirmation.

Applicant 1

Name: _____

Signature: _____

Date: _____

Applicant 2

Name: _____

Signature: _____

Date: _____

Applicant 3

Name: _____

Signature: _____

Date: _____

Section 12 – Identity Check

Please provide proof of identity and address for each applicant and, where requested, each grantee.

Accepted ID may include:

- passport
- photocard driving licence
- recent utility bill
- bank statement
- other official document showing current address

The Council may request original documents or certified copies.

ID submitted

Applicant name: _____

Type of ID: _____

Address check document: _____

Checked by: _____

Date checked: _____

(Repeat as required.)

Section 13 – Office Use Only

Application received on: _____

Application type:

- Add grantee
- Remove grantee
- Transfer grantee
- Other

Current register checked:

- Yes
- No

Existing deed produced:

- Yes
- No
- Not available

Entitlement route:

- Living grantee consent
- Probate
- Letters of Administration
- Statutory Declaration
- Other

Documents received:

- Death certificate
- Probate
- Letters of Administration
- Statutory Declaration
- Written consents
- ID documents
- Existing deed
- Other: _____

Council satisfied as to entitlement:

- Yes
 - No
- Further information required: _____

Register updated:

- Yes

No

Date updated: _____

Burial plan / file checked if required:

Yes

No

New / amended deed issued:

Yes

No

Date issued: _____

Fee charged: _____

Checked by Clerk / Proper Officer:

Name: _____

Signature: _____

Date: _____

Notes:

Documents Checklist for Applicants

Before submitting, please ensure you have enclosed:

- completed application form
- proof of identity
- proof of address
- existing deed / grant if available
- death certificate if relevant
- probate / letters of administration if relevant
- statutory declaration if relevant
- signed consent of all holders / entitled persons
- any additional supporting documents requested by the Council

Document control

- **Owner:** Burial Ground Committee
- **Responsible officer:** Clerk / Proper Officer
- **Adopted:** 11.05.2026 (Minute ref: 8e [26/008])
- **Version:** 2026.1
- **Review:** Annually or earlier if legislation/guidance changes
- **Next review due:** January-March 2027 at Burial Ground Committee meeting for formal adoption at Parish Council May 2027