

**Preliminary Application & Cremation Form 1
for the late**



Seven Hills crematorium

Seven Hills Crematorium • Felixstowe Road • Nacton • Suffolk • IP10 0FG

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Preliminary Application

Details of service (service time is 30 minutes within a 45 minute time slot)

Day..... Date..... Time.....

Full/Comm/No Service..... Religion..... Minister/Officiant.....

Music requirements

The Wesley music system is available at Seven Hills. An organ and organist is also available if required.

Entry..... Organ/Wesley

Music piece/Hymn1..... Organ/Wesley

Music piece/Hymn2..... Organ/Wesley

Music piece/Hymn3..... Organ/Wesley

Committal..... Organ/Wesley

Exit..... Organ/Wesley

Special instructions.....

Other requirements

CD record service? Yes/No Will the curtains remain open? Yes/No

DVD record service? Yes/No Is a large congregation expected? Yes/No

Webcast service? (when available) Yes/No Is the wheeled bier required? Yes/No

Is a double time slot required? Yes/No Bearers required? 1 / 2 / 3

(service time is 30 minutes within a 45 minute time slot)

Floral tributes

Either the Funeral Director, or the family, may remove the floral tributes from the crematorium at their discretion.

Flowers left at the crematorium will be removed 7 days after the service.

Instructions for Funeral Directors

The coffin must be made of wood or a wood by-product which, when placed in a cremator and subjected to the accepted cremation processes, is easily combustible and which does not emit smoke, give off toxic gas or leave any retardant smears or drips after final combustion. No metal furniture or fittings whatever shall be used on a coffin for cremation. No metal of any kind shall be used in the manufacture of a coffin except as necessary for its safe construction and then only metal of a high ferrous content. Cross pieces must not be added to the bottom of a coffin, if strengthening is needed wooden strips may be placed lengthways. The coffin must not be painted or varnished but may be covered with a suitable cloth. Products manufactured in polyvinyl chloride (PVC) must not be used and the use of polystyrene must be restricted to the coffin name plate only and must not exceed 90 grams in weight. The use of lead or zinc is strictly forbidden.

Size and weight of coffin

We are able to accept large and heavy coffins.

When booking please advise dimensions and weight so we can confirm acceptability.

Application for cremation of the body of a person who has died

Cremation 1
replacing Form A

This form can only be completed by a person who is at least 16 years of age.
Please complete this form in full, if a part does not apply enter 'N/A'.

Part 1 - Details of the crematorium

Name of crematorium where cremation will take place.

Seven Hills Crematorium

Name of Funeral Director

Address

Telephone number

Funeral Director (sign).....Date.....

Part 2 - Your details (the applicant)

Your full name

Address

Telephone number

Part 3 - Details of the person who has died

Full Name

Address

Occupation or last occupation if retired or not in work at date of death

Age at date of death

Male

Female

Status

Married/civil partnership

Widow/widower/surviving civil partner

Single

Part 4 - The application

1. Are you a near relative or an executor of the person who has died? Yes No

Please state relationship

Near relative means the widow, widower or surviving civil partner of the person who has died, or a parent or child of the person who has died, or any other relative usually residing with the person who has died.

If No, please give the nature of your relationship and explain why you are making the application rather than a near relative or executor.

2. Is there any near relative(s) or executor(s) who has not been informed of the proposed cremation? Yes No

If Yes, please give the name(s) and the reason(s) why they have not been contacted.

3. Has any near relative or executor expressed any objection to the proposed cremation? Yes No

If Yes, please give details.

4. What was the date and time of death of the person who has died?

Date

Time

5. Please give the address where the person died

Address

Please state whether it was the residence of the person who died or a hotel, hospital, or nursing home etc

Their home

Hospital

Other
(please specify)

Hotel

Nursing Home

6. Do you know or suspect that the death of the person who has died was violent or unnatural? Yes No

7. Do you consider that there should be any further examination of the remains of the person who has died? Yes No

If you have answered 'Yes' to questions 6 or 7, please give the reasons below.

8. What is the name, address and telephone number of the usual doctor of the person who has died?

Doctor's name

Address

Telephone number

9. Please give the name, address and telephone number of the doctor(s) who attended the person who has died during their last illness?

Doctor's name

Address

Telephone number

Doctor's name

Address

Telephone number

10. Was any implant placed in the body which may become hazardous when the body is cremated (e.g. a pacemaker, radioactive device or 'Fixion' intramedullary nailing system)? Yes No
 I don't know

Implants may damage cremation equipment if not removed from the body of the deceased before cremation and some radioactive treatments may endanger the health of crematorium staff.

If yes, please give details and state whether it has been removed.

Part 5 - Inspection of Certificates

You are entitled to inspect the certificates (if any) given by the doctors under Regulation 16(c) (i) of the Cremation Regulations 2008 (forms Cremation 4 and Cremation 5). If you do not wish to inspect any such certificates yourself you may nominate another person to inspect them instead of you.

Such certificates will only be available for inspection at the offices of the cremation authority for 48 hours from the time that the cremation authority notifies you, or the person you have nominated, that the certificates are available to be inspected. You may take someone with you when you attend to inspect the certificates. If you, or the person nominated by you, do not attend to inspect the certificates at the time agreed with the cremation authority, the cremation may then proceed.

Please state if you would like to inspect the certificates given by the doctors or whether you would like to nominate someone else to do so instead and give a contact telephone number.

If certificates are given by medical practitioners:-

I would like to inspect the certificates and

my contact number is

I nominate

to inspect the certificates and their contact telephone number is

Part 6 - Statement of truth

I apply for the body of the person who has died to be cremated and I certify that I am at least 16 years of age.

I believe that the facts given in this application are true. I am aware that it is an offence to wilfully make a false statement with a view to obtaining the cremation of any human remains.

Print your full name

Signed

Date

/ /

Cremated Remains

Please tick below next to the appropriate option

Scatter within the woodland _____

Is an appointment to witness required? _____ Yes No
(Please ring crematorium for appointment)

Retain on temporary deposit at the crematorium _____
(maximum of 2 weeks unless a memorial is being considered)

Removed by Funeral Director _____

Removed by Applicant _____

Removed by an authorised person other than the Funeral Director/applicant _____

N.B. If the applicant wishes the remains to be collected by a representative, a signed letter of consent must be produced before they are released.

A brochure of memorial options and details of the Book of Remembrance will be sent approximately 7 days after the service.

Name of Applicant.....

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

Environmental Policy

In order to preserve energy and natural fossil fuels a cremation may not always take place on the same day as the service, however, except in unusual circumstances, we will always aim to cremate within 24 hours.