



MAP REF: .....

AREA: .....

## PRE-PAID APPLICATION

Full Name: .....

Address: .....

..... Postcode: ..... Date of Birth: .....

### PLOT DETAILS

**Area:** Wildflower Meadow / Spring Corner / Bluebell Wood / Water's View      **Plot Cost:** .....

**Type of grave:** Full grave for one single depth burial / Plot for the burial of one set of ashes

This is for the first and only plot / This is for an additional plot, adjacent to plot no: .....

NB. (a) To secure additional plots, a Pre-Paid Plot Application form needs to be completed for each one

(b) Prices are NOT INCLUSIVE of the grave preparation & administration fee which is payable at the time of need

### APPLICANT DETAILS and SIGNATURE

Declaration: I hereby apply to purchase the Exclusive Rights of Burial that I have selected. I accept that the Rights of Burial will only be provided if I have paid the total cost and will be subject to the Terms and Conditions (attached hereto and also available to download from [www.oldparkmeadow.co.uk](http://www.oldparkmeadow.co.uk)) which I have read and fully understand. I am aware that I am buying exclusive Right(s) of Burial on the land, not legal ownership of the land itself for a period of 75 years and have been given a signed copy of this form.

Dated the ..... Day of ..... 20.....

Signature of applicant: .....

Applicant Full Name: .....

Applicant Address: .....

..... Postcode: .....

Telephone: ..... Email: .....

Relationship to the above: .....

*Old Park Meadow is a controller of personal data under the General Data Protection Regulation. We will only use your personal information for the purpose it was provided.*

Old Park Meadow Natural Burial Ground, Coppice Lane, North End, Chelmsford, Essex, CM6 3PL  
Tel: 01245 806332 Email: [info@oldparkmeadow.co.uk](mailto:info@oldparkmeadow.co.uk) Website: [www.oldparkmeadow.co.uk](http://www.oldparkmeadow.co.uk)  
Registered Office: 81 South Street, Bishop's Stortford, Herts, CM23 3AL Registered in England. Company Reg. No. 10525627



**SECOND APPLICANT (if applicable)**

Dated the ..... Day of ..... 20 .....

Signature of Second applicant: .....

Applicant Full Name: .....

Applicant Address: .....

..... Postcode: .....

Telephone: ..... Email: .....

Relationship to the person overleaf: .....

Signed on behalf of Old Park Meadow Ltd: .....

**PAYMENT**

Invoice to: Funeral Director / Applicant

Payment Type: Bank Transfer / Debit Card / Credit Card

Bank Details: Sort Code 20-97-40 Account Number: 73904296

Where did you hear about us? .....
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**All correspondence will be sent to the first applicant.**

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