

**APPLICATION FOR PERMISSION TO ERECT A MEMORIAL**  
**WOODHALL SPA CEMETERY 2024**

1. Name of Applicant.
2. EROB Grant number
3. Grave Space Number

1.  
2.  
3.

4. Address and daytime telephone  
Contact number of Applicant

3. Full Name of Deceased Person

4. Details of memorial to be erected i.e.  
headstone, vase, tablet, footstone,  
plaque etc.

5. Dimensions of memorial  
**Height x Width x Depth in mm**  
Maximum size of complete memorial  
Including the base is  
900mm x 900mm x 300mm

Memorial

Base

6. Colour and type of stone  
York Stone and wooden memorials  
Are not permitted

7. Full inscription as it will appear on  
the memorial

10. Colour of the lettering to be incised, details  
Of any other designs on the memorial

11. Stone Mason & Contact Name

SIGNATURE OF APPLICANT

DATE

**Office Use Only**

**Date Authorised**

Invoice Number

Date Payment Received

Date E Permit Sent

Grave Space