



Form of Renunciation

By completing this form, you are agreeing to relinquish any claim to the rights to the grave stated on this form.

I, the undersigned, hereby renounce all interests and title in the Exclusive Right of Burial of Grave number _____ at _____ Cemetery which was granted to the said _____ (full name of the deceased) by Nuneaton and Bedworth Council by Deed of Grant number _____ (If known) and I desire that the said Exclusive Right of Burial shall be vested to the proposed owner named on this form.

Name of Person Renouncing Rights _____

Address _____

_____ Postcode _____ Email _____

Relationship to Existing Grave Owner _____ Telephone Number _____

I confirm that I have completed this form and will forward to the proposed owner of the grave. The form will need to be presented with the Statutory Declaration.

Signature _____ Date _____

Name of Proposed Owner _____

Address _____

_____ Postcode _____ Email _____

Relationship to Existing Grave Owner _____ Telephone Number _____

Witness (Print Full Name) _____

Signature _____ Full Address and Postcode _____

_____ Date _____

Telephone _____ Email _____

Relationship to Person Renouncing Rights _____