

ROSCOMMON COUNTY COUNCIL

Application for Right of Interment in Closed Burial Grounds

Query	Reply
Name and Address of Applicant	
Age	
State whether Married, Single or Widowed	
If Widowed, state whether late partner was interred in Burial Ground	
Date of last Interment	
Give particulars, if possible, including date of Interment of all persons already interred in the grave space	
State whether last surviving member of family	
Reasons for preference for Burial in above cemetery	
Means of identification of Grave, eg, Headstone	

I hereby apply for Right of Interment in _____ Closed Burial Ground.

Signature of Applicant: _____

Date: _____

Certificate of County Medical Officer

I have examined the above application for right of interment in _____ Closed Burial Ground and I am/am not satisfied that the Burial can be carried out without offence against public health or decency.

Signed: _____
County Medical Officer

Date: _____