



Direct Cremation Form

Cremation Number

General Details

Deceased Name:

Date of cremation:

Time of cremation:

Funeral director:

Funeral director address:

Telephone number:

Applicants name:

Relationship to the deceased

Applicants telephone numbers:

Home:

Mobile:

Important information and ashes instructions

At a Direct Cremation there will be no service or mourners in attendance

All metal residues will be recycled and the proceeds will be donated to local charities.
If you would prefer instead to reclaim these residues personally please tick this box ☐

Often families will change their original decision regarding their loved ones ashes having had time for further consideration. We will contact the applicant following the cremation to confirm that their instructions for the ashes has not changed

As the applicant for the cremation of the above named deceased I confirm that I have completed the instructions for the ashes on the accompanying '**Cremation1**' application and that I have read and understood the contents of this form.

Applicant signature:

Date:

Privacy Statement: We use this information on this form to fulfil our contractual obligation with you, to administer the cremation, and so that we can meet our legal obligations. We do not use your personal data for any other purpose, nor do we pass it on to a third party.