**Schedule 1 Regulation 3**

**Form BF1**

# Application for the burial of the remains of an adult or child

|  |  |  |
| --- | --- | --- |
| Burial number  [official use only] |  | Burial authority logo and/or address:    Paisley Diocese  St Conval's Cemetery  Glasgow Road, Barrhead G78 1TH |
| Full name of deceased |  |
| Name of burial ground |  |
| Day and date of burial |  |
| Time of service |  |

**This is a statutory form made under regulation 3 of the Burial (Applications and Register) (Scotland) Regulations 2024 and the information and questions contained in it should not be changed.**

This form must be used to apply for the burial of the remains of an adult or child in Scotland. The application is made to the burial authority you want to carry out the burial. The burial authority is the organisation responsible for managing the burial ground where the burial is to take place.

As the person who is applying for the burial, you are ‘the applicant’. You must have the legal right to apply for the burial (see guidance note on “Legal right to apply for a burial”).

The burial authority will need to check the form to make sure it contains all of the necessary information. Missing or inaccurate information may result in the burial being delayed or refused. If you are unsure about what information is required, or what any part of the form means, you can speak to the funeral director who is making the arrangements, staff at the burial authority or to any other person who is arranging the funeral. It is not a requirement to use the services of a funeral director to arrange a burial but where one is being used, the funeral director must sign the relevant part of this form.

**Personal details of individuals contained in this form are not to be used for any other purpose.**

The information provided on this form is a legal requirement under the Burial and Cremation

(Scotland) Act 2016 (“the Act”) and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act.

You have the right to know what data is held about you and you can, by contacting the burial authority in writing, receive a copy of that data. The burial authority is obliged to include in their privacy notice how the information will be held, for how long and how you may make a complaint to the Information Commissioner’s Office.

## Forms checklist

You should ensure that you have attached all required documents to this application form based on where the death occurred. The burial authority needs to have them for the burial to take place. Please see guidance note on “Forms checklist”, which sets out which documents are required.

# Section 1: Your information ‘the applicant’

This section is used to record your details. In completing this form you are the applicant for the burial.

Please see guidance note on “Legal right to apply for a burial”, for information on who can apply.

Applicants must be 16 years of age or older on the date the deceased died to apply for the burial. Applicants may be under the age of 16 if they are the parent of the child who has died, however, you may wish to seek the support of a parent or guardian if you feel it would be helpful.

|  |  |
| --- | --- |
| Title |  |
| Full name |  |
| Address |  |
| Postcode |  |
| Telephone number |  |
| Email address |  |
| Relationship to the deceased |  |

# Section 2: Information about the person who died

|  |  |
| --- | --- |
| Title |  |
| Full name |  |
| Name used on coffin plate  (if different) |  |
| Date of birth (DD/MM/YYYY) |  |
| Date of death or date found dead (DD/MM/YYYY) |  |
| Age at death |  |
| Address |  |
| Postcode |  |
| If remains are cremated, date and place of cremation (if known) |  |

# Section 3: Burial details

|  |  |
| --- | --- |
| Name of burial ground |  |
| Burial ground address and postcode |  |
| Type of burial  (see guidance note on  “Type of Burial”) | Coffin burial  Ashes |
| Type of lair(a) | New lair  Please describe type (see guidance note on “Type of new lair”)  ........................................................................................................  Existing lair, but no previous burial  Please describe location in burial ground (e.g. section and lair number)  ........................................................................................................  Existing lair which contains a previous burial  Please describe location in burial ground (e.g. section and lair number) and give details of last burial (deceased name and date of burial)  ........................................................................................................ |
| Is this a war grave? | Yes No |
| If yes, have you contacted the Commonwealth War Graves Commission and/ or the Ministry of Defence? Please briefly summarise any discussion here. (see guidance note on “War Graves”) |  |
| Any other requests or instructions? |  |

(a) A lair is a Scottish term for a burial plot or grave.

# Section 4: Hazards

This section is used to record details of anything which might be a public health hazard or have an environmental impact on groundwater. You do not need to complete this section for ashes. (see guidance note on “Hazards”)

Are you aware if any of the following apply:

Does the body of the deceased pose a risk to public health: for example did the deceased have a notifiable infectious disease or was their body “contaminated” immediately before death?

Yes No

Are there implant(s) present in the deceased? (see guidance note on “Hazards” for examples)

Yes No

Is there radioactive material or any other hazardous implant currently present in the deceased?

Yes No

Is the deceased chemically embalmed (e.g. formaldehyde present)?

Yes No

If you answered ‘yes’ to the questions above about implants and/or radioactive material, please give details and state whether the device has been removed.

# Section 5: Applicant’s declaration

**5.1: Authority to open lair for burial** (see guidance note on “Authority to open lair for burial”)

Please tick:

I am the registered lair right-holder

I am purchasing a new lair and wish to be registered as the lair right-holder

The lair right-holder is deceased(a)

Name of lair right-holder ................................................................................................................... Relationship of lair right-holder to deceased ....................................................................................

I am the representative or nearest relative of the deceased, but not the lair-right holder(b)

Name of lair right-holder ................................................................................................................... Relationship of lair right-holder to deceased ....................................................................................

Any other information:

1. If the lair right-holder is deceased, the burial authority may require you to sign an indemnity or complete a transfer of the right of burial. Please contact the burial authority separately to complete the process.
2. If you are the nearest relative or representative of the deceased, but not the lair right-holder, you will require their permission to open the lair and written consent must be submitted with your application.

## 5.2: Declaration of entitlement to apply for burial

(see guidance note on “Declaration of right to apply for burial”)

This section requires you to declare that the information you have provided in this form is true to the best of your knowledge and that you are entitled to apply for this burial. It is an offence to knowingly provide false information and if you do so you may be liable on summary conviction to a fine up to Level 3 on the standard scale.

I am entitled to apply for this burial and I hereby declare that the details and information provided in sections 1-5 are complete and correct to the best of my knowledge.

Signed: ...................................................................................................................................................

Full Name: ..............................................................................................................................................

Date: .......................................................................................................................................................

# Section 6: Funeral director details

This section is to be completed by the funeral director if funeral directing services are used.

## Coffin or casket details

|  |  |  |
| --- | --- | --- |
| Coffin/ashes casket material (including handles) (see guidance note on “Coffin material”) | |  |
| Coffin/ashes casket shape  (see guidance note on “Coffin/casket shape”) | |  |
| External Coffin/ashes casket | Overall length  IN FEET |  |
| Width at widest part (including any handles fully extended)  IN INCHES |  |
| Width at narrowest part  IN INCHES |  |
| Depth  IN INCHES |  |
| Combined weight of deceased and coffin (in kg) | |  |
| Any other requests or instructions? | | |

I declare that I have discussed the options with the applicant and know no reason why the burial cannot take place. I understand that if I become aware of anything that may mean the burial should be delayed, I must inform the burial authority and the applicant.

Signed: ...................................................................................................................................................

Full Name: ..............................................................................................................................................

Date: .......................................................................................................................................................

Company name and address: ................................................................................................................

Business email address: .........................................................................................................................

Business telephone: ...............................................................................................................................

# Section 7: Authorisation for burial (to be completed by the burial authority)

Please confirm the location in the burial ground of the new or existing lair to be used for this burial:

(e.g. lair number/section/extension) .......................................................................................................

This section is used by the burial authority to confirm that the application is in order and that the burial can take place.

I confirm that I have seen the appropriate documentation to allow the burial to take place. If any document is missing, please contact the applicant or their funeral director.

I confirm that all relevant sections of this form have been completed.

I confirm that I approve this application for burial.

Signed: ..................................................................................................................................................

Full Name: .............................................................................................................................................

Position: .................................................................................................................................................

Date: ....................................................................................................................................................