Application for burial of the remains of an adult or child by a local authority where they are making arrangements under section 87 of the 2016 Act

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

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 is used by a local authority to apply for the burial of the remains of an adult or a child where: a) a person dies or is found dead within the area of the local authority; and b) it appears that no arrangements have been or are being made for the remains to be buried or cremated.

This application form must be completed by a representative of the local authority. The application is made to the burial authority which is to carry out the burial. The burial authority will need to examine the form to make sure that it contains all of the necessary information. Missing information or information the burial authority does not think is accurate may result in the burial being delayed or refused. The local authority representative applying for the burial is 'the applicant' and has the legal right to apply for the burial under section 87 of the 2016 Act. If you are unsure about any of the information that is required, or are not sure what any part of the form means, you should speak to staff at the burial authority or to the funeral director who is making the arrangements.

## 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 the necessary documents to this application form. The burial authority will need to have them to allow the burial to take place.

Required	
Certificate of Registration of D	Death
Section 1: Your information	on 'the applicant'
This section is used to record yo	ur details, as the representative of the local authority responsible for
Title	n you are the applicant for the burial.
Full name	
Position	
Local authority	
Business address	
Postcode	
Business telephone	
Business email address	
Section 2: Information abo	ut the person who died
Title	
Full name	
Place of death	
Date of birth (DD/MM/YYYY)	
Date of death or date found dead (DD/MM/YYYY)	
Age at death	
Address	
Postcode	
Deceased's faith (if known)	
Place of death (if known)	
Name of hospital or practice where the doctor certified the death	
Section 3: Burial ground de	etails
Name of burial ground	
Burial ground address and postcode	

T. (n = e.51 - i. (n)	
Type of lair <sup>(a)</sup>	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)

## Section 5: Declaration

I declare that I have the legal right to apply for this burial. To the best of my knowledge and belief, all the information given in this application is correct, no information has been omitted and authorisation for the disposal has been obtained.

Signed:
Full Name:
Date:
Organisation:
Business address and postcode:
Business telephone:

## Section 6: Funeral director details (if applicable)

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

Coffin details			
Coffin material (including handles)			
Coffin shape			
External Coffin Measurements (in cm)	Overall length		
	Width at widest part (including any handles fully extended)		
	Width at narrowest part		
	Depth		
Combined weight of decease	ed and coffin (in kg)		
Any other requests or instructions?			
I declare that I have discussed	d the entions with the enti-	ant and know no reason why the burial	
cannot take place. I understar be delayed, I must inform the	nd that if I become aware of	anything that may mean the buriel should	
Signed:			
Full Name:	••••••		
Date:		Substitution for excellent and account of ac	
Company name and address:			
Business email address:			
<b>Section 7: Authorisation</b>	for burial (to be compl	eted by the burial authority) or existing lair to be used for this burial	
(e.g. lair number/section/exten	nsion)		
Please confirm that the application is in order and that the burial can take place (please tick).			

I confirm that I have received the necessary 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: