Customer Services Desk: 0818 065000 Email: customerservices@tipperarycoco.ie



NOTICE OF INTERMENT FORM

Section 1 & 2 to be completed & signed by the Caretaker / Registrar and Undertaker/Family Member

Section 1: Details of Deceased			
BURIAL GROUND:			
Name of Deceased in Full:			·
Deceased Last Place of Residence:			
-			
Date of Birth:	Date of Death:	Age at D	eath:
Date of Interment:	Religion:	Sex:	
Occupation	Marital Status: Single, Married, Widow/er		
Section 2: Details of Burial Plot / Right of Burial Deed Owner			
Burial in New Plot: Or, Burial in Existing Purchased Plot: (tick as appropriate)			
Allocated Section	Row Number	Plot Numb	er
Please specify previous burials in this plot (e.g. 0, 1 etc.):			
Right of Burial Deed Owner (Name & Address):			
Signed: Signed:			
CARETAKER / REGISTRAR OF BURIA	AL GROUND	UNDERTAKER	FAMILY MEMBER
Date:		(tio	ck as appropriate)
Section 3: For Tipperary Co Co Office Use Only			
Entered on the Register by:		Entered on Map by:	
(Staff Member) Environment & Climate Action /		(Staff Member) Date:	
Municipal District:			
Interment Register Number:		Has Plot Been Paid For (Yes / No):	