

Ashes Instructions – Mortlake Crematorium

Day & date of Funeral:	Time:	Mortlake Cremation Ref:
Full Name of the Deceased:		
Funeral Director & Branch:		

Collection

I would like my Funeral Director to collect the ashes

I will collect the ashes within 2 weeks of the cremation

Mortlake Crematorium is part of a National Scheme with other Cremation Authorities that has any metal residues resulting from cremation collected and recycled. The monetary proceeds are given to a local death related charity. If you would like any metals returned to you please tick the box.

The following named person will collect the ashes & they will bring identification i.e. a passport

_____ Tel No: _____

I will provide an urn / casket / scatter tube

I require an overseas certificate

Gardens of Remembrance

I would like the ashes to be scattered on the lawns in the Gardens of Remembrance. The ashes will be scattered one week after the funeral and **I do not wish to be present.** *

I would like to be present at the scattering of the ashes on the lawns in the Gardens of Remembrance and understand that this needs to be done within a month of the cremation. Please phone the Crematorium to make an appointment *

I would like the ashes to be scattered in the same area as:

Full name of previous deceased _____

Date of Death _____ Location Ref: _____

Full Name of Applicant: _____

Tel No: _____ Signed _____ Date: _____

This section to be filled in at the time the ashes are collected:

Name in Full: _____ (Funeral Director) _____

Signed: _____ Date: _____

Office use only

Checked	Released	BACAS	FILED
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