

Quotation Request for Headstone/Memorial Cleaning and Refurbishment

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| Cemetery | | Grave No. | |
| Name of deceased person(s) in grave | | Date received (office use only) | |

Please detail what works you would like carried out on the headstone or memorial:

| | |
|-----------------------|--|
| Name: | Telephone Number: |
| Email Address: | Confirmation that I am one of the current grave owners. (Please mark as appropriate) Yes No Unsure |

Please email this request to bereavementcare@bcpcouncil.gov.uk.

Alternatively, return the application to one of our Bereavement Care Offices detailed at the bottom of this form.

A member of the team will be in touch with you to discuss the quotation and confirm the arrangements.

Please check our website www.bcpbereavementcare.co.uk for our current office opening times.

BCP Bereavement Care Offices

Bournemouth Crematorium, Strouden Avenue, Bournemouth BH8 9HX
 Poole Crematorium, Gravel Hill, Poole BH17 9BQ
 T. 01202 128111 E. bereavementcare@bcpcouncil.gov.uk

bcpbereavementcare.co.uk



Provided by