# GENERAL INFORMATION

REQUIRED FOR REGISTERING THE DEATH AND TO ENABLE YOUR AFFAIRS TO BE DEALT WITH.

### Personal Details

* NHS card and/or NHS number (enter number)………………………
* Marriage certificate (copy can be stored with this form)
* Birth certificate or date and place of birth (provide a copy)
* Present or last occupation…………………………………………….
* **If married: -**
* Maiden name………………………………………………………….
* Name of spouse………………………………………………………..
* Occupation of spouse………………………………………………….

### Helpful information

* Mortgage details
* Home insurance details
* Life assurance details
* Rent book
* Gas supplier
* Electric supplier
* Water supplier
* Telephone account details
* Mobile phone providers
* Bank Account(s)
* Building Society Account(s)
* Credit Card(s)
* Unit Trust(s)
* ISA fund(s)
* Share(s)
* Premium Bonds(s)
* State Pension
* Occupational Pension
* War Pension
* Hire purchase agreement(s)
* Car details
* G.P.’s details
* Solicitor’s details
* Accountant
* Stockbroker
* Living Will
* Organ Donor card

My next of kin is……………………………………………………….

Address…………………………………………………………………

Postcode…………………………………………………………………

Telephone Number……………………………………………………..

I would / would not prefer to die at home if possible

My will can be found / I have not made a will (delete as applicable)

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

I have/have not made a living will – this should be given to your next of kin

I do/do not wish to donate my body to medical science (this must be arranged prior to death)

#### The person responsible for arranging my funeral is:-

Name……………………………………………………………………….

Address…………………………………………………………………….

Postcode……………………………………………………………………

Telephone Number………………………………………………………...

I would like you to arrange my funeral using the following funeral director:

##### Brooks, 16-18 Church Hill Road, East Barnet, Herts, EN4 8TB

**020 8441 6062**

#### I have / do not have a pre-paid funeral plan

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

* If I die in hospital/hospice, I would / wouldn’t wish for my body to be returned home prior to the funeral.
* I would / would not like my body to be viewed
* I would / would not like an open coffin
* I would like the following coffin

………………………………………………………………………….

* On the day of the funeral I would like my body to be transported by:-

Hearse/estate car/horse drawn carriage/motorcycle hearse/other

……………………………………………………………………………..

* On the day of the funeral I would like my family to be transported in Limousines / Carriages / their own cars
* I would like my family &/or friends to bear my coffin
* I would like the funeral directors staff to carry my coffin
* I would like / not like to have flowers
* I would like family flowers only
* I would like donations to be given to the following:-

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

* I would like an obituary notice to be placed in the following places

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

* Any other information

# THE FUNERAL SERVICE

* I would / would not like a funeral service to be held

Many people find it difficult to cope without some sort of ceremony or ritual, which to many people is a way in which they can show their love and respect. However if you choose the ‘simple way’ perhaps you can suggest to family and friends they can hold a memorial service in your favourite place to celebrate your life – spend the money they would have used on a ‘traditional’ funeral to have a lovely meal out or a family picnic in your favourite spot.

* I would like my funeral service to religious / non religious

Please specify any Church you would like a service to be held at

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Please specify any particular religious service you would like

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

* If you are not sure of a particular person/Church we can make arrangements at time of need be it a religious service or a humanist.
* I would like the following hymns/readings/poems

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

# CREMATION

* I would like my funeral to be held at …………………………….. ……………………………………………. Crematorium
* I would / would not like guests to attend the cremation
* After the cremation, I would prefer my cremated remains:-
1. **PLACED AT AN EXISTING MEMORIAL. (It may be necessary to see a Memorials Advisor before this takes place)**
2. **DISPERSED AT THE CREMATORIUM**
3. **REMOVED BY MY FAMILY**
4. **SPECIAL INSTRUCTIONS & ADDITIONAL INFORMATION:**

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

* I would like my ashes placed in the following container

…………………………………………………………………………….

* I would like the following memorial (delete as applicable)

Rose bush

Plaque

Book of Remembrance

Headstone

Memorial Seat ………………………………………(state where)

Other…………………………………………………………………………………………………………………………………………………….

# BURIAL

When considering Burial please be aware that certain cemeteries do not allow the purchase of new graves and others will not allow you to purchase prior to need (It is best to discuss your plans with us)

* I would like to be buried in the following cemetery

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

* I have / have not purchased a grave (If you have, please attach copies of the relevant deeds to this document and make sure the originals can be easily found. If they cannot be found, and the grave cannot be identified, it maybe that you will not be able to use the grave)

The person named as the grave owner is:-

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

(Making a child over 18 the grave owner will avoid the need to change the ownership after your death, you can be a joint owner)

* The existing grave I wish to buried in is at …………………………..

Cemetery. It is in section………………….Grave Number ……………. ……………………………The last person to be buried in this grave was

……………………………………………………………………………………………………on …………………………………………………

(please attach copies of the grave deeds) We will check with the Cemetery authority that there is room in the grave once we receive this form.

* I would like the following type of memorial (please be aware that certain Cemeteries only allow specific memorials)

Headstone

Headstone and kerbs

Other ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

* We are able to provide details of monumental mason’s however when the time comes I would advise your family to compare various companies for prices. If you have a mason you would like to use please provide details……………………………………………………………………..

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Thank you for doing all you can to follow my wishes. It is particularly appreciated at this time.

Signed……………………………………………………………………...

Date………………………………………………………………………...

Name (print)……………………………………………………………….

Full address ………………………………………………………………. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………… ……………………………………………………………………………

Witness signature………………………………………………………….

Full name and address…………………………………………………….

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………