

BRAMM

**BURIAL
AUTHORITY**

**APPLICATION
FORM**

APPLICATION FORM

PLEASE COMPLETE IN BLOCK CAPITALS

1. FULL NAME OF BURIAL AUTHORITY.....
2. ADDRESS.....
 TOWN

 COUNTY.....POST CODE
3. TEL NO
4. FAX NO
5. E-MAIL ADDRESS
6. WEB SITE
7. CONTACT NAME
8. POSITION
9. PLEASE LIST THE CEMETERIES THAT COME UNDER YOUR AUTHORITY.

CEMETERY	ADDRESS

Deadline Dates: We would advise a period of a minimum of six months.

Business Accreditation :

Fixer Accreditation:

BRAMM

British Register of Accredited Memorial Masons

8 The Crescent, Taunton, Somerset. TA1 4EA

Tel: 01788 544963

Fax: 01823 253681

E-mail: bramm@bramm-uk.org

DECLARATION

We understand that we are required to adhere to the following:-

1. Monitoring of memorial masons – random checking of installations.
2. Compliance with NAMM standards on any foundations, repairs etc.
3. Compliance with ICCM Code of Safe Working Practice on burial procedures, particularly on backfilling of graves.
4. Responsibility for local disciplinary process and informing BRAMM Head Office.
5. Commitment to providing virgin ground or concrete plinths for all new memorials, where this is possible.
6. Have a commitment to training.

Signed: Date:

Name:

Position:.....

Supporting Organisations



British Register of Accredited Memorial Masons

Scheme Administered by :

BRAMM
8 The Crescent
Taunton
Somerset
TA1 4EA

Tel: 01788 544963

Fax: 01823 253681

E-mail: bramm@bramm-uk.org
Web site: <http://www.bramm-uk.org>



Burial Authority Application 10/02