**2021**

**PETITION FOR FACULTY**

**MEMORIAL/REPLACEMENT MEMORIAL**

**No application should be made for the introduction of a memorial, nor permission granted, until at least six months after the date of the burial or in relation to cremated remains six months from the date of cremation.**

**Petitioners must complete PART A and then ask the Incumbent or Priest-in-Charge (if none, the Area Dean) to complete PART B.**

**Petitioners must then return the completed form to the Diocesan Registrar at Chelmsford Diocesan Registry, Minerva House, 5 Montague Close, London, SE1 9BB.**

**The Faculty Jurisdiction Rules 2015 require public notice to be given of all relevant works or proposals requiring a Faculty. In the case of memorials, the Registrar will provide a form of Public Notice once he has received the Diocesan Advisory’s Committee Notification of Advice relating to the proposed memorial concerned. Please be aware that the Public Notice is 28 days.**

**The statutory Court fee to lodge a Petition for Faculty is £305.40 and cheques should be made payable to ‘Diocesan Registry’.**

**TO THE CONSISTORY COURT OF THE DIOCESE OF CHELMSFORD**

**Parish of ………………………………………………………………**

**The Petitioner(s) *(insert full name, address, email and telephone number)***

**…………………………………………………………………………………………..**

**…………………………………………………………………………………………..**

apply for a Faculty authorising the erection of a memorial or additional memorial (or removal of existing memorial and its replacement) in the Churchyard of:

…………………………………………………………………………..

**PART A**

**INFORMATION TO BE SUPPLIED BY PETITIONER(S)**

1. Name of person to be commemorated: ……………………………………………………..

2. Date of burial: ....................................................................................................................

3. Relationship of Petitioner(s) to person to be commemorated:

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4. Do the other close relatives of the deceased support this petition? .................

If yes, please supply letter(s) of support.

5. Part of Churchyard in which grave is situated:

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6. Measurements of memorial: ............................................................................................

7. Type of material to be used: ............................................................................................

8. What colour will the memorial be?.....................................................................................

9. Is permission sought for any part of the memorial to be honed or polished? If so, what part?

………………………………………………………………………….

10. Description of decoration (if any):

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

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11. Type and colour of lettering …………………………………….……………………………

12. Wording of inscription *(Please read the note below before choosing the wording as inappropriate wording is unlikely to be allowed. If there is insufficient space here please attach a separate piece of paper):*

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

13. Written confirmation from the monumental mason or supplier of the memorial that the stone has been ethically sourced and processed is to be attached to this form. This may be done by the monumental mason completing and signing the attached certificate.

**Notes about Inscriptions**

1. **Full names are to be used. Any name by which the deceased was usually known may be permitted in brackets after the Christian name provided that an explanation of the reason for requesting this accompanies this petition.**
2. **Wording must be consistent with Christian belief in life after death and should not simply be an expression of personal loss or sorrow without any indication of an expected reunion in eternal life.**
3. **An appropriate quotation from the Bible may be used.**
4. **You may suggest wording which you believe describes the best in the life or character of the person.**
5. **You may try to produce original wording of your own and avoid copying a standard phrase or verse.**

14. Name and address of Monumental mason:

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15. Any special reason which the Petitioner wishes to give for choice of memorial and/or inscription:

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16. Full sketch and/or photograph of memorial with dimensions, showing ground level, to be drawn on or attached to this page. A photograph of the area of the Churchyard showing the relevant grave and adjacent graves and memorials, should also be attached. If a replacement memorial is being petitioned for a photograph of the current memorial must be provided.

**Notes:**

* **Only 1 flower vase will be allowed.**
* **Where the ground is not level the concrete base must be sunk so that no part of it projects above ground level.**

**I/WE ..........................................................................................., the Petitioner(s) herein undertake that if a Faculty is granted the memorial will be erected in exact conformity with its description in this Petition. I/WE have read the current edition, or had explained to me, the Regulations relating to the Churchyards, issued by the Chancellor of the Diocese.**

**Dated: .................................................Signed: …………………………………………**

TO BE COMPLETED BY MONUMENTAL MASON

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| --- |
| **Certificate of Compliance**  We have read the current edition of the said ‘Churchyard Handbook’ and explained them to the applicant and we confirm that the memorial described in this application will be erected in accordance with the current NAMM Code of Working Practice supporting BS8415.  The memorial will be supplied in strict accordance with the Faculty, if granted.  I am aware of the Diocese of Chelmsford’s requirement on the ethical sourcing and processing of stone and I certify that the stone has been ethically sourced and processed.  Name of Customer ……………………..…………………………………………………………………….  Name of Churchyard …………………………………………………………….………………………….  Name of deceased ………………………………………………………..………………………………….  Name and address of the monumental mason  …………………………………………………………………….……………………………………………  …………………………………………………………………………………………………………………..  …………………………………………………………………………………………………………………..  Name ……………………………… Signed ………………………………………….  Date …………………….  Monumental Mason – I confirm I have Public Liability Insurance to £10 million. |

**PART B**

**Information to be supplied by the Incumbent, Priest-in-Charge (if none, the Area Dean).**

1. Have you any comments to make about the proposed inscription?

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2. What is the view of the Parochial Church Council about the suitability of the proposed memorial in this part of the Churchyard?

***Please enclose a copy of the PCC Resolution in full***

3. What is your view about the suitability of the proposed memorial in relation to the fabric of the Church?

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

4. Are there any other similar memorials in the vicinity of this grave? .....................

If so, how many? .......................

5. Approximately how far away from the Church is this grave?

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6. Will this memorial hamper the cutting of the grass or maintenance of the Churchyard generally?

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7. Has the Parochial Church Council any plan for the of tombstones?

a) in operation? .....................................................................................................

b) for the future? ..................................................................................................

8. Is the churchyard closed by Order in Council? .....................

9. Have you any other comments to make on this Petition?

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**Dated: ................................ Signed: ...............................................................**

**NOTE:**

**Has the P.C.C. adopted any Rules over and above the Diocesan Regulations? *If so, please attach a copy of these Rules*.**