

# The Scottish Cremation Society Limited

Glasgow Crematorium, Western Necropolis, Maryhill, Glasgow, G23 5AA

This Application, Certificate of Registration of Death and any appropriate supporting information should be lodged, by 10 a.m on the working day prior to the day of cremation, at 25 Bothwell Street, Glasgow, G2 6NL Telephone No. 0141-567-4500

## FORM A - APPLICATION FOR CREMATION

I (Name of applicant) .....

(Address) ..... (Postcode) .....

(Occupation) .....

apply to THE SCOTTISH CREMATION SOCIETY LTD to undertake the cremation of the remains of

(Name of Deceased) .....

(Address) ..... (Postcode) .....

(Occupation) .....

(Age) ..... (Sex) .....

(Whether married, civil partner, widow, widower, surviving civil partner, neither married nor in a civil partnership)

The true answers to the questions set out below are as follows:-

(1) Are you an executor or the nearest surviving relative of the deceased?

.....

(2) If not, state:

(a) Your relationship to the deceased, .....

(b) The reason why the application is made by you and not by an executor or any nearer relative

.....

(3) Have the near relatives' of the deceased been informed of the proposed cremation? .....

'near relative' as here used includes widow or widower, civil partner, parents, children above the age of 16, and any other relative usually residing with the deceased.

(4) Has any near relative of the deceased expressed any objection to the proposed cremation? If so, on what grounds?

.....

(5) What was the date and hour of death of the deceased?

.....

(6) What was the place where deceased died? (Give address, and say whether own residence, lodgings, hotel, hospital, nursing home, etc)

.....

(7) Do you know, or have you any reason to suspect, that the death of the deceased was due, directly or indirectly, to (a) violence (b) poison (c) privation or neglect?

.....

(8) Do you know, or have you any reason to suspect that the death of the deceased occurred while under anaesthetic?

.....

(9) Do you know of any reason whatever for supposing that an examination of the remains of the deceased may be desirable?

.....

(10) Give name and address of the ordinary medical attendant of the deceased

.....

(11) Give names and address of the medical practitioners who attended deceased during the last illness

.....

**Hazards**

To the best of my knowledge and belief:

1. Does the body of the deceased pose a risk to public health: for example, did the deceased have a notifiable infectious disease or was their body "contaminated", immediately before death?	Yes/No
2. Is there a cardiac pacemaker or any other potentially explosive device currently present in the deceased?	Yes/No
3. Is there radioactive material or other hazardous implant currently present in the deceased?	Yes/No

The hazard questions above no. 1-3 must be completed. If answered yes, the applicant should specifically outline any known disposal hazards or reasons that the body cannot be cremated.

I declare that to the best of my knowledge and belief the information given in this application is correct and no material particular has been omitted.

Date.....(Signature of applicant).....

The applicant is known to me and I have no reason to doubt the truth of any of the information furnished by the applicant.

Date.....(Signature).....

(Capacity in which signatory has signed).....

(Address).....

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## SUPPLEMENTARY APPLICATION FOR FUNERAL SERVICE

(To accompany Form A)

- |   |                                  |
|---|----------------------------------|
| (1) Full name of the deceased   | (1) .....                        |
| (2) Age last birthday .....   | (2) Male or Female .....         |
| (3) Permanent address of deceased   | (3) .....                        |
|   | ..... Postcode .....             |
| (4) Has been deceased been fitted with a Pacemaker or other implant                     | (4) .....                        |
| (5) Cremation arrangement   | (5) Day.....Date.....Time.....   |
| (6) Is it proposed to hold a Service or Committal                                       | (6) .....                        |
| (7) Name of Officiating Clergy / Denomination   | (7) Name..... Denomination ..... |
| (8) Organ or Recorded Music   | (8) Entry.....                   |
|   | Committal / Reflection .....     |
|   | Retiral .....                    |
| (9) State which of the following is proposed in reference to the Ashes after Cremation: | (9) .....                        |
| (A) To be taken by representative (within 5 days)                                       | (A) .....                        |
| (B) Dispersed in Crematorium grounds  | (B).....                         |
| (C) Disperse with family attending  | (C) .....                        |
| (10) Will the expected number of mourners exceed 50 person                              | (10) .....                       |
| (11) Name and address of Funeral Director   | (11) .....                       |
|   | .....                            |
| Telephone.....  | Signature.....                   |
| (12) Names and address of applicant who signed form A                                   | (12) .....                       |
|   | .....                            |

I HEREBY UNDERTAKE to abide and be bound by the General Instructions, Rules and Regulations of the Society and I absolve the Society from any legal or other responsibility through any accident arising to any Urn, Niche, Tablet or Monument of the deceased, or through the destruction of the Crematorium by fire, civil tumult, and act of God, or through any other cause whatever and also for any delay or inconvenience in the arrangements for Cremation.

Signature of Applicant .....

## INSTRUCTION OF FUNERAL DIRECTORS

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**CONSTRUCTION OF THE COFFIN.** The coffin must be made of a suitable material which, when placed in a cremator and subjected to the accepted cremation processes, is easily combustible and which does not emit smoke, give off toxic gas or leave any retardant smears or drips after final combustion. No metal furniture or fittings whatever shall be used on a coffin for cremation. No metal of an kind shall be used in the manufacture of such coffin except as necessary for its safe construction and then only metal of a high ferrous content. Cross pieces must not be attached to the bottom of the coffin. If it is desired to strengthen the bottom of the coffin, wooden strips may be placed lengthways for this purpose. External coatings to a coffin must allow for smokeless combustion and nitro-cellulose varnish, polyurethane, polyamidoamine-epichlorohydrin base resins, melamine and any products containing polyvinyl chloride (PVC) must not be used. Water based lacquer free from additives containing heavy metals may be used for coating a coffin or a suitable cloth may be used for covering a coffin. Products containing any chloride or fluorides are prohibited e.g. melamine. The exception to the foregoing in the use of polystyrene, which is restricted to the coffin nameplate only, and this must not exceed 20 grams of weight.

**LINING OF THE COFFIN.** The use of sawdust or cotton-wool must be avoided. If circumstances require, suitable sealing material may be used manufactured from polythene not exceeding 75 microns in thickness, but no metal, rubber or PVC will be permitted and on no account must pitch or similar substance be used. Lead of Zinc linings are not permitted, nor is the use of shredded paper within a coffin.

**SIZE OF THE COFFIN.** Where the external dimensions of a coffin are likely to exceed length 86 inches (218cm): width 40 inches (102cm): depth 29 inches (74cm) the proper officer of the crematorium must be given advance notice. Bariatric cremations are conducted in the Old Chapel and an early morning booking time must be taken.

**CLOTHING.** In order to minimise the release of pollutants to air, it is recommended that clothing should be of natural fibres and that shoes or any material manufactured from PVC should not be included. Body adornments manufactured from copper should be removed, as should any easily removable prosthesis or cast of plaster or other material. Additional items, particularly of glass or plastic, should not be placed in the coffin.

**NOTICE OF CREMATION.** The Funeral Director must observe the Cremation Authority's regulation regarding the length of notice to be given for a cremation and the time of the cremation, as agreed, must be strictly adhered to. All statutory and non-statutory forms and certificates, as required by the Cremation Authority, must reach the cremation office by the specified time

**CREMATION OF INFANTS.** In cases where bereaved parents desire the cremation of the body of an infant, they should be warned that there may be occasions when no tangible remains are left after the cremation process has been completed. Every effort and care however will be undertaken to maximise recovery of ashes.

**CREMATED REMAINS.** Ashes are released in an industry standard bio-degradable receptacle.

Funeral Directors ..... Tel No.....

Address.....

We declare that the coffin and its fittings conform to the requirements detailed above

Signed of behalf of the above.....

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**NOTE:-** The Directors of the Scottish Cremation Society, Limited, reserve to themselves the right of refusing to carry out Cremation in any case without assigning any reason.

Visitors:- The Crematorium is open to visitors on Sundays from 11 a.m to 3 p.m