

## Form of Assignment Local Authorities Cemeteries Order 1977

l (title and full name)

Of (full address and postcode)				(Telephone Number)			
Being the sole/Joint (delete as app	_		e grave o	r vault desc	ribed in		
grave number, (	Of Doncaster Co	ouncil's				Cemetery,	
which was granted to (insert the	full name of the persor	named on the Deed o	f Grant)				
by Deed of Grant No	bearing th	e date (date)	day	of (month)		(year)	
Do hereby assign to transfer t							
my estate and title, and inter and in the position approved		0 0		0			
Of (Full address and postcode)			(	(Telephone Number)			
Subject to the conditions on v	which were held	d by myself im	nediately	before the	execut	ion thereof.	
Witness my Hand and Seal th	İS (date)	day of (month)			(Year)		
Signed and delivered by me							
(Signature)							
In the presence of				Date [			
(Signature of witness)							
(Full Name and Address of Witness)							
(Occupation of Witness)			(Witness Tele	hone Number)			