

Granite mushrooms are free standing and can be found in the Gardens of Remembrance. They are placed at locations where ashes can be scattered. Each mushroom has a selection of inset granite plaques in a contrasting colour offering space for a personalised inscription for the dedication of a loved one.

The Terms and Conditions that apply are:-

1. The initial lease period is for either 5, 10 or 20 years from the date of placing the memorial plaque on the wall. The lease can continue to be renewed by lease periods in existence at the time of expiry.
2. Only the leaseholder can apply for an extension on the lease or any changes to the plaque.
3. At the end of the lease, the leaseholder will be contacted at the last given address. If the leaseholder changes address it is their responsibility to inform the Bereavement Services office.
4. If the lease is not renewed, the plaque will be removed from the grounds and retained for 3 months in the Bereavement Services office, from where it can be collected if required.
5. If we have not heard from the leaseholder within 3 months after the expiry date, we will make arrangements for the plaque to be recycled.
6. The plaque is primarily intended to be dedicated to one person, but it is possible to inscribe two names. Please note that the space available will remain the same.
7. The wording on the plaque is restricted to a maximum of 12 characters per line and a total of 5 lines.
8. The council reserves the right to refuse any wording that is considered unsuitable.
9. The final layout of the inscription is at the discretion of the engraver. We are unable to accept responsibility for an incorrect inscription due to illegible writing.
10. Once placed on the mushroom, the plaque becomes the property and responsibility of the leaseholder.
11. No vases, pot plants, shrubs, bedding plans or any other form of tribute are permitted in the grounds.
12. Leaseholders will be notified when the plaque is in position.
13. The plaques can be replaced with a new plaque with a new inscription at any point in the lease for an additional fee. The lease will be from the placement of the original plaque.



## **Bereavement Services**

### **Memorial Mushroom Application Form**

Cambridge City Crematorium  
Huntingdon Road  
Cambridge  
CB3 0JJ

01223 458000

[bereavementservices@cambridge.gov.uk](mailto:bereavementservices@cambridge.gov.uk)

[www.bereavement.cambridge.gov.uk](http://www.bereavement.cambridge.gov.uk)

<b>LINE 1</b>																			
<b>LINE 2</b>																			
<b>LINE 3</b>																			
<b>LINE 4</b>																			
<b>LINE 5</b>																			

Please complete the guide box in block capitals using one character per box, ensuring spaces are left between each word. We will centre the text on the finished plaque. \*BLACKED OUT AREAS SHOW WHICH SPACES MAY NOT BE USED (due to the plaque being circular).

I wish to dedicate a mushroom plaque in memory of the above named deceased.

Please indicate if you have a preferred location.....

Name of Applicant: Mr/Mrs/Miss/Dr/Other: .....  
 Address: .....  
 .....  
 Postcode: .....  
 Telephone Number: .....  
 Mobile: .....  
 Email address: .....

**Fees**

£322.00 for the dedication of a mushroom plaque for a 5 year lease, £644.00 for the dedication of a mushroom plaque for a 10 year lease and £1,288.00 for the dedication of a mushroom plaque for a 20 year lease.

Replacement plaques are available for an additional fee, please contact the office.

Prices correct until 31<sup>st</sup> March 2020

I have referred to the guidance and prices and enclose a cheque for £..... in respect of the fees for a mushroom plaque (cheques should be made payable to Cambridge City Council).

If you wish to pay by debit or credit card please tick here and we will telephone you: [ ]

Alternatively, if you would like to pay via direct debit over a period of 12 months, please contact the office.

**Data Protection**

Cambridge City Council will use the information you have provided on this form for administration of your memorial application. You have the right to see the information held about you and to have any inaccuracies corrected. Cambridge City Council Bereavement Services shall retain and process your data in accordance with UK Data Protection and Privacy legislation.

We will contact you at the end of the lease period to notify you of your options regarding the memorial unless you advise us accordingly.

I have read these Terms and Conditions and agree to abide by them. I confirm the inscription and details above are correct and in accordance with the guidance.

Applicant's Signature: ..... Date: .....

Please send your completed application to the Bereavement Services office at the address overleaf.