SCHEDULE 10

Regulation 15(1)(b)

CREMATION REGISTER – BODY PARTS

FORM B2

Register of Cremation of Body Parts

ame of crematorium]

Address of the deceased	Sex of the deceased	Date of birth	Date of death	Date and place of burial or cremation of body	Body parts being cremated	Name and address of person applying for cremation	Name and address of person signing certificates	Dispersal of ashes information (and changes and dates)
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