FORM B2

Register of Cremation of Body Parts

ame of crematorium]

SCHEDULE 10

Regulation 15(1)(b)

CREMATION REGISTER – BODY PARTS

Dispersal of ashes information (and changes and dates)							
Name and address of person signing certificates							
Name and address of person applying for cremation							
Body parts being cremated							
Date and place of burial or cremation of body							
Date of death							
Date of birth							
Sex of the Date deceased of birth							
Address of the deceased	1						