

Comhairle Chontae Uíbh Fhailí

**Offaly County Council, Áras an Chontae,
Charleville Road, Tullamore, Co. Offaly**

Environment and Water Services Section

Tel: 057 9357403 Fax: 057 9346868

e-mail: environment@offalycoco.ie



APPLICATION FOR EXHUMATION LICENSE

I hereby make an application to Offaly County Council for a licence for the exhumation of the remains of the deceased person named below from a grave in which he/she was interred, and for his/her removal for purposes of re-interment, and I certify that the particulars given below are true in all respects. If the application is granted I agree to carry out any conditions contained in the licence.

1	Name of deceased, in full	
2	Date of death	
3	Cause of death (A death certificate must be enclosed with the application)	
4	Name and location of burial ground in which the deceased is interred	
5	Registered number or other means of identification of grave space in which the deceased is interred	
6	Consent in writing to the proposed exhumation should be obtained from the owner of the grave space in which the deceased is interred and should be attached to this application.	
7	Name and address of Authority or Parish/ person in whom the burial ground is vested	
8	State whether the deceased was married, single, or widowed	
9	Relationship or connection of applicant with the deceased	

10	State whether the applicant is the nearest living relative of the deceased, and, if not, why the application is not made by the nearest living relative	
11	State whether any objection has been raised or is likely to be raised to the proposed exhumation, and if so by whom and on what grounds	
12	State whether the remains are to be re-interred in the same burial ground and if not, give the name and location of the burial ground in which it is proposed to re-inter the remains	
13	Registered number or other means of identification of grave space in which it is proposed to re-enter the remains with written consent of the owner of the grave space.	
14	Name and address and phone number of the Registered owner of the grave space in which it is proposed to re-enter the remains	
15	Reasons for desiring the exhumation and full circumstances in which the remains came to be interred in the original grave (attach letter if necessary)	
16	Name and address of undertaker who will arrange the exhumation in the event that approval is granted for the exhumation	

I hereby declare that all information given by me on this form is accurate to the best of my knowledge and I know of no person or group of persons who do not wish to proceed with the exhumation under the conditions as outlined in the foregoing.

Name of Applicant (block capitals) _____

Signature of Applicant _____

Address _____

Phone Number: _____

Date: _____

DOCUMENTS TO ACCOMPANY APPLICATION

- **Death Certificate**
- **Consent to the proposed exhumation from senior member of the clergy for the relevant parish (if not an Offaly County Council burial ground)**
- **Consent to the proposed exhumation from the owner of the grave space in which the deceased is interred**
- **Enclose fee of €113.50 (€100 plus VAT @ 13.5%). Note: Total costs of the exhumation are a matter for the applicant. Fully completed application form and fee should be submitted to: Environment Section, Offaly County Council, Aras an Chontae, Tullamore, Co. Offaly**
- **Council, Public Health, Gardaí together with the Undertaker and grave digging staff ONLY may attend an exhumation**

Part 2

CERTIFICATE OF PRINCIPAL ENVIRONMENTAL HEALTH OFFICER

Name of Health Board _____

I hereby certify that the above exhumation and removal can be carried out without danger to public health or breach of public decency.

Signature: - _____

Principal Environmental Health Officer

Date: - _____

Part 3

CONSENT OF LOCAL AUTHORITY OR OTHER AUTHORITY CONTROLLING THE BURIAL GROUND

Name of Authority OFFALY COUNTY COUNCIL

I hereby consent to the above exhumation and removal.

Signature: - _____

Grade: Director of Services

Date: - _____
