

Application for burial in a burial ground of body parts donated in Scotland and in possession of a person licensed under section 3(2) of the Anatomy Act 1984 before the commencement of the Anatomy Act 1984 (14 February 1988) or where the date of death is not known or is before 14 February 1988.

Burial number [official use only]		Burial authority logo and/or address:
Burial authority registration number		
Burial ground		
Day and date of burial		
Time of burial		

This is a statutory form made under regulation 3 of the Burial (Applications and Register) (Scotland) Regulations 2024 and the information and questions contained in it should not be changed.

This form is used to apply for the burial of body parts which were:

- a) donated to a Scottish university for anatomical examination or teaching before commencement of the Anatomy Act 1984 (14 February 1988) (donation and death before 14 February 1988), or
- b) educational bones or specimens given to a Scottish university at any time, but where the date of death is not known or is understood to be before 14 February 1988.

This application must be signed by the person authorised to make the application for burial. The application is made to the burial authority which is to carry out the burial. The burial authority will need to check the form to make sure it contains all of the necessary information. Missing or inaccurate information may result in the burial being delayed or refused. If you are unsure about any of the information that is required, or are not sure what any part of the form means, you should speak to staff at the burial authority where the burial is to take place.

Personal data

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 and will be processed in line with data protection legislation. The data will be held by the burial authority. It will be held securely, in confidence and processed solely for purposes set out by or under the Burial and Cremation (Scotland) Act 2016. It will not be shared with any third party other than an inspector of burial, if requested. You have the right to know what data is held about you and you can, by contacting the burial authority in writing, receive a copy of that data. The burial authority is obliged to include in their privacy notice how the information will be held, for how long and how you may make a complaint to the Information Commissioner's Office.

Section 1: Burial details

Name of burial ground	
Burial ground address and postcode	
Type of burial	☐ Full coffin burial ☐ Other casket (body part)
Type of lair ^(a)	☐ New lair ☐ Existing lair, but no previous burial Please describe location in burial ground (e.g. section and lair number) ☐ Existing lair which contains a previous burial Please describe location in burial ground (e.g. section and lair number) and give details of last burial (deceased name and date of burial)
Any other requests or instructions?	

^(a) A lair is a Scottish term for a burial plot or grave.

Section 2: Application for burial

I, (name of Licensed Teacher of Anatomy/authorised person^(b))

at (name of Scottish university) request that the body part(s) described below is/are buried. I confirm that the body part(s) described below were either

donated to or acquired by (insert university name)

before the commencement of the Anatomy Act 1984 (14 February 1988) or were given to the university after this date, but the date of death is not known but understood to have been before 14 February 1988.

Anatomy reference number	Parts for disposal

^(b) The university may authorise a suitable person to complete Form A7 (such as a Bequest Co-ordinator).

Section 3: Declaration

I declare that I have the legal right to apply for this burial. To the best of my knowledge and belief, all the information given in this application is correct, no information has been omitted and authorisation for the disposal has been obtained.

Signed:

Full Name:

Date:

Organisation:

Business address and postcode:

Business telephone:

Section 4: Funeral director declaration (if applicable)

This section is to be completed by the funeral director if funeral directing services are used.

Coffin or casket details

Coffin/casket material (including handles)		
Coffin/casket shape		
External Coffin/casket Measurements (in cm)	Overall length	
	Width at widest part (including any handles fully extended)	
	Width at narrowest part	
	Depth	
Combined weight of deceased and coffin (in kg)		
Any other requests or instructions?		

I declare that I have discussed the options with the applicant and know no reason why the burial cannot take place. I understand that if I become aware of anything that may mean the burial should be delayed, I must inform the burial authority and the applicant.

Signed:

Full Name:

Date:

Business name and address:

Business email address:

Business telephone:

Funeral director registration number:

Section 5: Authorisation for burial

Please confirm the location in the burial ground of the new or existing lair to be used for this burial

(e.g. lair number/section/extension)

This section is used by the burial authority to confirm that the application is in order and that the burial can take place.

☐ I confirm that all relevant sections of this form have been completed.

☐ I confirm that I approve this application for burial.

Signed:

Full Name:

Position:

Date: