SCOTTISH STATUTORY INSTRUMENTS

2024 No. 334

BURIAL

The Burial (Applications and Register) (Scotland) Regulations 2024

Made - - - -	*12th November 2024*
Laid before the Scottish Parliament	*14th November 2024*
Coming into force - -	*1st March 2025*

The Scottish Ministers make the following Regulations in exercise of the powers conferred by sections 8, 10 and 106(1) of the Burial and Cremation (Scotland) Act 2016(**a**) and all other powers enabling them to do so.

In accordance with section 104(1) of that Act, they have consulted burial authorities and such other persons as they consider appropriate.

Citation, commencement and interpretation

1.—(1) These Regulations may be cited as the Burial (Applications and Register) (Scotland) Regulations 2024 and come into force on 1 March 2025.

(2) In these Regulations—

"the Act" means the Burial and Cremation (Scotland) Act 2016,

"adult" means a person who is 16 years of age or over,

"child" means a person (other than a still-born child) who is under 16 years of age,

"electronic communication" has the meaning given in section 15(1) (general interpretation) of the Electronic Communications Act 2000(**b**) and similar expressions are to be construed accordingly.

(3) A form set out in a schedule of these Regulations and any accompanying information, documents or certificates may be communicated electronically.

(4) A signature required as shown on a form set out in a schedule of these Regulations must, where—

(a) an electronic form is used or a form is an electronic communication, be—

(i) a signature in digital ink, or

(ii) an image of a signature,

(b) a paper form is used, be a signature in ink,

and must be the signatory's handwritten signature.

(**a**) 2016 asp 20.
(**b**) 2000 c. 7. Section 15 was amended by paragraph 158 of schedule 17 of the Communications Act 2003 (c. 21).

Records

2.—(1) Each burial authority must retain for a period of 50 years, beginning with the date on which the burial is carried out, all burial application forms submitted in accordance with regulation 3 and any accompanying information, documents or certificates.

(2) Subject to any requirement made by an inspector under section 91(1) of the Act, all documentation retained under paragraph (1) must be treated by the burial authority as confidential.

(3) The burial authority must ensure that all documentation retained under paragraph (1) is at all times kept in an accessible form in secure conditions and that all appropriate measures are taken to prevent theft, unauthorised disclosure, damage, loss or destruction.

Application for burial

3.—(1) An application under section 8(1) of the Act (application to carry out burial) is to be made in accordance with this regulation.

(2) An application for burial may be submitted where—

(a) the deceased is an adult by—

(i) the person specified by the adult in an arrangements on death declaration(**a**) made by the adult,

(ii) any person who may make arrangements on the death of the adult by virtue of section 65(2), 68 or 87 of the Act,

(iii) a person employed in the provision of, or managing the provision of, a care home service at which the deceased was living at the time of his or her death, or

(iv) the managers of the hospital in which the deceased died or any officer or person designated for that purpose by the managers,

(v) the body, body part or parts of the deceased have undergone anatomical examination, or are in the possession of a person licensed under section 3(2) of the Anatomy Act 1984(**b**), by the person licensed to carry out the examination or have possession of the body, part or parts, or any other person authorised by the licensed person to submit it,

(b) the deceased is a child, by a person who may make arrangements on the death of the child by virtue of section 66(2), 68 or 87 of the Act,

(c) the remains to be buried are those of a still-born child or fetus, by the mother, or the person with authority to make arrangements in relation to the remains of that still-born child or fetus by virtue of Part 3 of the Act, or

(3) An application for—

(a) the burial of the remains of an adult or child (other than an application made by a local authority) must be in the form set out in schedule 1 and contain the information specified in sections 1 to 5 of that form,

(b) the burial of the remains of a still-born child must be in the form set out in schedule 2 and contain the information specified in sections 1 to 5 of that form,

(c) the burial of the remains of a fetus where an individual is making arrangements for the burial of the fetus, must be in the form set out in schedule 3 and contain the information specified in sections 1 to 4 of that form,

(d) the burial of the remains of a fetus where a person other than an individual is making arrangements for the burial under Part 3 of the Act must be in the form set out in schedule 4 and contain the information specified in sections 1 to 3 of that form,

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(**a**) An "arrangements on death declaration" is defined in section 65(8) of the Act.
(**b**) 1984 c. 14.

(e) the burial of the remains of an adult or child by a local authority where they are making arrangements under section 87 of the Act (burial or cremation: duty of a local authority) must be in the form set out in schedule 5 and contain the information specified in sections 1 to 5 of that form,

(f) the burial of a body, body part or body parts of an adult following anatomical examination where authority was given under section 4A(1) or section 4(2) of the Anatomy Act 1984 for the person's body to be used for anatomical examination must be in the form set out in schedule 6 and contain the relevant information specified in sections 1 to 3 of that form,

(g) the burial of a body part or parts of an adult which are in possession of a person licensed under section 3(2) of the Anatomy Act 1984, where the deceased died before 14th February 1988, or where the date of death is not known, must be in the form set out in schedule 7 and contain the information specified in sections 1 to 3 of that form.

(4) In paragraph (2)(a)(iii) "care home service" means a care home service within the meaning of paragraph 2 of schedule 12 of the Public Services Reform (Scotland) Act 2010(**a**).

(5) In paragraph (2)(a)(iv) "managers" means—

(a) in relation to a hospital vested in the Scottish Ministers under the National Health Service (Scotland) Act 1978(**b**) ("the 1978 Act") the Health Board, or Special Health Board, responsible for the administration of that hospital,

(b) in the case of a hospital vested in a National Health Service trust established under section 12A of the 1978 Act (**c**) the directors of the trust,

(c) in the case of an independent health care service which is registered under section 10Q(1) of the 1978 Act the person identified under section 10P(2)(b) of that Act (**d**) in the application for registration, and

(d) in the case of a state hospital—

(i) where the Scottish Ministers have delegated the management of the hospital to a Health Board, Special Health Board, National Health Service or the Common Services Agency for the Scottish Health Service, that Board, trust or agency or,

(ii) where the management of the hospital has not been so delegated, the Scottish Ministers.

Burial Register

4.—(1) For the purpose of section 10(1) of the Act, the prescribed information which a burial register must contain is—

(a) for the burial of the remains of an adult or child, the information in part 1 of schedule 8,

(b) for the burial of a body part or parts, the information in part 2 of schedule 8, and

(c) for the burial of the remains of a fetus or still-born child, the information in part 3 of schedule 8.

(2) The information in respect of each burial must be entered on the register by the burial authority as soon as practicable after the burial.

(3) The burial authority must—

(a) review the register from time to time, and

(**a**) 2010 asp 8.
(**b**) 1978 c. 29.
(**c**) Section 12A was inserted by section 31 of the National Health Service and Community Care Act 1990 (c. 19).
(**d**) Sections 10Q and 10P were inserted by the Public Services Reform (Scotland) Act 2010, section 108.

(b) ensure that the information contained within it is accurate and up to date.

JENNI MINTO
Authorised to sign by the Scottish Ministers

St Andrew's House,
Edinburgh
12th November 2024

SCHEDULE 1

Regulation 3

Form BF1

Application for the burial of the remains of an adult or child

Burial number [official use only]		Burial authority logo and/or address:
Full name of deceased		
Name of burial ground		
Day and date of burial		
Time of service		

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 must be used to apply for the burial of the remains of an adult or child in Scotland. The application is made to the burial authority you want to carry out the burial. The burial authority is the organisation responsible for managing the burial ground where the burial is to take place.

As the person who is applying for the burial, you are 'the applicant'. You must have the legal right to apply for the burial (see guidance note on "Legal right to apply for a 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 what information is required, or what any part of the form means, you can speak to the funeral director who is making the arrangements, staff at the burial authority or to any other person who is arranging the funeral. It is not a requirement to use the services of a funeral director to arrange a burial but where one is being used, the funeral director must sign the relevant part of this form.

Personal details of individuals contained in this form are not to be used for any other purpose.

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 ("the Act") and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act.

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.

Forms checklist

You should ensure that you have attached all required documents to this application form based on where the death occurred. The burial authority needs to have them for the burial to take place. Please see guidance note on "Forms checklist", which sets out which documents are required.

Section 1: Your information 'the applicant'
This section is used to record your details. In completing this form you are the applicant for the burial. Please see guidance note on "Legal right to apply for a burial", for information on who can apply. Applicants must be 16 years of age or older on the date the deceased died to apply for the burial. Applicants may be under the age of 16 if they are the parent of the child who has died, however, you may wish to seek the support of a parent or guardian if you feel it would be helpful.

Title	
Full name	
Address	
Postcode	
Telephone number	
Email address	
Relationship to the deceased	

Section 2: Information about the person who died

Title	
Full name	
Name used on coffin plate (if different)	
Date of birth (DD/MM/YYYY)	
Death of death (DD/MM/YYYY)	
Age at death	
Address	
Postcode	
If remains are cremated, date and place of cremation (if known)	

Section 3: burial details

Name of burial ground	
Burial ground address and postcode	
Type of burial (see guidance note on "Type of Burial")	☐ Coffin burial ☐ Ashes
Type of lair[(a)]	☐ New lair *Please describe type (see guidance note on "Type of 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)* ……
Is this a war grave?	☐ Yes ☐ No
If yes, have you contacted the Commonwealth War Graves Commission and/or the Ministry of Defence? Please briefly summarise any discussion here. (see guidance note on "War Graves")	
Any other requests or instructions?	

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

Section 4: Hazards
This section is used to record details of anything which might be a public health hazard or have an environmental impact on groundwater. You do not need to complete this section for ashes. (see guidance note on "Hazards")

Are you aware if any of the following apply:

Does the body of the deceased pose a risk to public health: for example did the deceased have a notifiable infectious disease or was their body "contaminated" immediately before death?
☐ Yes ☐ No

Are there implant(s) present in the deceased? (see guidance note on "Hazards" for examples)
☐ Yes ☐ No

Is there radioactive material or any other hazardous implant currently present in the deceased?
☐ Yes ☐ No

Is the deceased chemically embalmed (e.g. formaldehyde present)?
☐ Yes ☐ No

If you answered 'yes' to the questions above about implants and/or radioactive material, please give details and state whether the device has been removed.

Section 5: Applicant's declaration

5.1: Authority to open lair for burial (see guidance note on "Authority to open lair for burial")

Please tick:

☐ I am the registered lair right-holder
☐ I am purchasing a new lair and wish to be registered as the lair right-holder
☐ The lair right-holder is deceased[(a)]
Name of lair right-holder ……..
Relationship of lair right-holder to deceased ……..

☐ I am the representative or nearest relative of the deceased, but not the lair-right holder[(b)]
Name of lair right-holder ……
Relationship of lair right-holder to deceased ……..

Any other information:

[(a)] If the lair right-holder is deceased, the burial authority may require you to sign an indemnity or complete a transfer of the right of burial. Please contact the burial authority separately to complete the process.
[(b)] If you are the nearest relative or representative of the deceased, but not the lair right-holder, you will require their permission to open the lair and written consent must be submitted with your application.

5.2: Declaration of entitlement to apply for burial (see guidance note on "Declaration of right to apply for burial")

This section requires you to declare that the information you have provided in this form is true to the best of your knowledge and that you are entitled to apply for this burial. It is an offence to knowingly provide false information and if you do so you may be liable on summary conviction to imprisonment for a term not exceeding 12 months or to a fine up to Level 3 on the standard scale.

I am entitled to apply for this burial and I hereby declare that the details and information provided in sections 1 - 5 are complete and correct to the best of my knowledge.

Signed: ……..
Full Name: ……
Date: ……..

Section 6: funeral director details
This section is to be completed by the funeral director if funeral directing services are used.

Coffin or casket details

<table>
<tr><td colspan="2">Coffin/ ashes casket material (including handles)
(see guidance note on "Coffin material")</td><td></td></tr>
<tr><td colspan="2">Coffin/ ashes casket shape
(see guidance note on "Coffin/ casket shape")</td><td></td></tr>
<tr><td rowspan="4">External Coffin/ ashes casket Measurements (in cm)

(see guidance note on "External coffin/ ashes urn or casket measurements")</td><td>Overall length</td><td></td></tr>
<tr><td>Width at widest part (including any handles fully extended)</td><td></td></tr>
<tr><td>Width at narrowest part</td><td></td></tr>
<tr><td>Depth</td><td></td></tr>
<tr><td colspan="2">Combined weight of deceased and coffin (in kg)</td><td></td></tr>
<tr><td colspan="2">Any other requests or instructions?</td><td></td></tr>
</table>

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: …….
Company name and address: ……..……..
Business email address: ……
Business telephone: ……

Section 7: authorisation for burial (to be completed by the burial authority)

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 I have seen the appropriate documentation to allow the burial to take place. If any document is missing, please contact the applicant or their funeral director.
☐ 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: …….

SCHEDULE 2

Regulation 3

Form BF2

Application for burial of the remains of a stillborn baby

Burial number [official use only]		Burial authority logo and/or address:
Baby's name (if given)		
Name of burial ground		
Day and date of burial		
Time of service		

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 must be used to apply for the burial of the remains of a stillborn baby in Scotland. A stillborn baby is a baby delivered after 24 weeks gestation without showing any signs of life. The application is made to the burial authority you want to carry out the burial. The burial authority is the organisation responsible for managing the burial ground where the burial is to take place.

As the person who is applying for the burial, you are 'the applicant'. You must have the legal right to apply for the burial (see guidance note on "Legal right to apply for a 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 what information is required, or what any part of the form means, you can speak to the funeral director who is making the arrangements, staff at the burial authority or to any other person who is arranging the funeral. It is not a requirement to use the services of a funeral director to arrange a burial but where one is being used, the funeral director must sign the relevant part of this form.

Personal details of individuals contained in this form are not to be used for any other purpose.

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 ("the Act") and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act. 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.

Forms checklist

You should ensure that you have attached all required documents to this application form based on where the death occurred. The burial authority needs to have them for the burial to take place. Please see guidance note on "Forms checklist", which sets out which documents are required.

Section 1: Your information 'the applicant'
This section is used to record your details. In completing this form you are the applicant for the burial. Please see guidance note on "Legal right to apply for a burial" on who can apply. Applicants must be 16 years of age to apply for the burial. Applicants may be under the age of 16 if they are the parent of the stillborn baby, however, you may wish to seek the support of a parent or guardian if you feel it would be helpful. If you are completing the form on behalf of a health authority please use the business address and contact details.

Title	
Full name	
Address	
Postcode	
Telephone number	
Email address	
Relationship to stillborn baby	

Section 2: burial ground details

Name of burial ground	
Burial ground address and postcode	
Type of burial (see guidance note on "Type of Burial")	☐ Coffin burial ☐ Ashes
Type of lair[(a)]	☐ New lair *Please describe type (see guidance note on "Type of 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's full name and date of burial)* ……

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

Is this a war grave?	☐ Yes ☐ No
If yes, have you contacted the Commonwealth War Graves Commission and/or the Ministry of Defence? Please briefly summarise any discussion here. (see guidance note on "War Graves")	
Any other requests or instructions?	

Section 3: Application for the burial of the remains of a stillborn baby
This section is used to record the details of a stillborn baby (please tick only one option below and move to relevant section(s)).

For stillbirth

☐ I am the parent of the baby who was stillborn (Please complete section 3A)

☐ I have been authorised by the parent of the stillborn baby to make the application (please complete sections 3A, and 3B.)

Section 3A: stillborn baby

Forename of baby (if given)	
Surname	
Date stillbirth was delivered (DD/MM/YYYY)	

Section 3B: Authorisation details

What is your relationship to the baby (if you are not the parent)?	
Name of baby's mother	
Address and postcode of baby's mother	
Unique identifying number (if you are applying on behalf of a health body) See guidance note on "The unique identifying number"	

Section 4: Hazards
This section is used to record details of anything which might be a public health hazard or have an environmental impact on groundwater. You do not need to complete this section for ashes. (see guidance note on "Hazards")

Are you aware if any of the following apply:

Does the baby pose a risk to public health: for example did the mother have a notifiable infectious disease immediately before delivery?
☐ Yes ☐ No

Is the deceased chemically embalmed (e.g. formaldehyde present)?
☐ Yes ☐ No

Are there implant(s) present in or on the body?
☐ Yes ☐ No

Is there radioactive material currently present in or on the body?
☐ Yes ☐ No

If you answered 'yes' to the questions above about implants and/or radioactive material, please give details and state whether the device has been removed.

Section 5: Applicant's declaration and consent

5.1: Authority to open lair for burial (see guidance note on "Authority to open lair for burial")

Please tick:
☐ I am the registered lair right-holder
☐ I am purchasing a new lair and wish to be registered as the lair right-holder
☐ The lair right-holder is deceased[(a)]
Name of lair right-holder ……..……..
Relationship of lair right-holder to deceased ……..
☐ I am the representative or nearest relative of the deceased, but not the lair-right holder[(b)]
Name of lair right-holder ……
Relationship of lair right-holder to deceased ……..

Any other information:

[(a)] If the lair right-holder is deceased, the burial authority may require you to sign an indemnity or complete a transfer of the right of burial. Please contact the burial authority separately to complete the process.
[(b)] If you are the nearest relative or representative of the deceased, but not the lair right-holder, you will require their permission to open the lair and written consent must be submitted with your application.

5.2: Declaration of entitlement to apply for burial (see guidance note on "Declaration of right to apply for burial")
This section requires you to declare that the information you have provided in this form is true to the best of your knowledge and that you are entitled to apply for this burial. It is an offence to knowingly provide false information and if you do so you may be liable on summary conviction to imprisonment for a term not exceeding 12 months or to a fine up to a Level 3 on the standard scale.

I am entitled to apply for this burial and I hereby declare that the details and information provided in sections 1 - 5 are complete and correct to the best of my knowledge.

Signed: ……..
Full Name: ……
Date: ……..

Section 6: funeral director details
This section is to be completed by the funeral director if services are used.

Coffin or casket details

Casket material (including handles) (see guidance note on "Coffin material")		
Casket shape (see guidance note on "Coffin/ casket shape")		
External Casket Measurements (in cm) (see guidance note on External coffin/ ashes urn or casket measurements)	Overall length	
	Width at widest part (including any handles fully extended)	
	Width at narrowest part	
	Depth	
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: …….
Company name and address: ……..……...
Business email address:…….
Business telephone: ……...

Section 7: authorisation for burial (to be completed by the burial authority)

Please record the location in the burial ground of the new or existing lair to be used for this burial (e.g. lair number/ section/ extension) ……

Please confirm that the application is in order and that the burial can take place (please tick).

☐ I confirm that I have received the necessary documentation to allow the burial to take place. If any document is missing, please contact the applicant or their funeral director.
☐ 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: …….

SCHEDULE 3

Regulation 3

Form BF3

Application for burial of the remains of a pregnancy loss in a burial ground (by individual)

Burial number [official use only]		Burial authority logo and/or address:
Baby's name (if given)		
Name of burial ground		
Date of burial		
Time of service		

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 must be used to apply for the burial of the remains of a pregnancy loss in Scotland, where the loss occurred on or before the end of the 24th week of gestation and showed no signs of life. This application form should be completed by the woman who has experienced the pregnancy loss, unless the woman authorises another person to complete the form on her behalf or if she is unable to due to exceptional circumstances.

The application is made to the burial authority you want to carry out the burial. The burial authority is the organisation responsible for managing the burial ground where the burial is to take place. 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 what information is required, or what any part of the form means, you can speak to the funeral director who is making the arrangements, staff at the burial authority or to any other person who is arranging the funeral. It is not a requirement to use the services of a funeral director to arrange a burial but where one is being used, the funeral director must sign the relevant part of this form.

Personal details of individuals contained in this form are not to be used for any other purpose.

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 that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act. 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.

Forms checklist
You should ensure that you have attached all required documents to this application form based on where the death occurred. The burial authority needs to have them for the burial to take place. Please see guidance note on "Forms checklist", which sets out which documents are required.

Section 1: Your information 'the applicant'
This section is used to record your details. In completing this form you are the applicant for the burial (see guidance note on "Legal right to apply for a burial"). Applicants must be 16 years of age or older to apply for a burial. Applicants may be under the age of 16 if they are the woman who experienced the loss, however, you may wish to seek the support of a parent or guardian if you feel it would be helpful.

Title	
Full name	
Address	
Postcode	
Phone number	
Email address	

Section 2: burial ground details

Name of burial ground	
Burial ground address and postcode	
Type of burial (see guidance note on "Type of burial")	☐ Coffin burial ☐ Ashes
Type of lair[(a)]	☐ New lair *Please describe type (see guidance note on "Type of 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)* ……

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

Is this a war grave?	☐ Yes ☐ No
If yes, have you contacted the Commonwealth War Graves Commission and/or the Ministry of Defence? Please briefly summarise any discussion here. (see guidance note on "War graves")	
Any other requests or instructions?	

Section 3: Application for the burial of the remains of a pregnancy loss

This section is used to record the details of a pregnancy loss (please tick only one option below and move to relevant section(s)).

☐ I am the person who experienced the pregnancy loss (please complete section 3A).

☐ I have been authorised by the person who experienced the pregnancy loss to make the application (please complete sections 3A and 3B).

Section 3A: details of the pregnancy loss

Date pregnancy loss occurred (DD/MM/YYYY)	
Forename of baby (if given)	
Surname	

☐ Please tick to confirm that the midwife, registered nurse or medical professional has issued a letter or certificate to confirm that a pregnancy loss has taken place.

Section 3B: details of the person who experienced the pregnancy loss

Please state your relationship to the person who experienced the pregnancy loss	
Full name of the person who experienced the pregnancy loss	
Address and postcode of the person who experienced the pregnancy loss	

Section 4: Applicant's declaration and consent

4.1: Authority to open lair for burial (see guidance note on "Authority to open lair for burial")

Please tick:
☐ I am the registered lair right-holder
☐ I am purchasing a new lair and wish to be registered as the lair right-holder
☐ The lair right-holder is deceased[(a)]
Name of lair right-holder ……..
Relationship of lair right-holder to deceased ……
☐ I am the representative or nearest relative of the deceased, but not the lair-right holder[(b)]
Name of lair right-holder ……
Relationship of lair right-holder to deceased ……..

Any other information:

4.2: Declaration of entitlement to apply for burial (see guidance note on "Declaration of right to apply for burial")

This section requires you to declare that the information you have provided in this form is true to the best of your knowledge and that you are entitled to apply for this burial. It is an offence to knowingly provide false information and if you do so you may be liable on summary conviction to imprisonment for a term not exceeding 12 months or to a fine up to Level 3 on the standard scale.

I am entitled to apply for this burial and I hereby declare that the details and information provided in sections 1 - 5 are complete and correct to the best of my knowledge.

Signed: ……..
Full Name: ……
Date: ……..

Section 5: funeral director details
This section is to be completed by the funeral director if services are used.

Coffin or casket details

Casket material (including handles) (see guidance note on "Coffin material")	
Casket shape (see guidance note on "Coffin/ casket shape")	

[(a)] If the lair right-holder is deceased, the burial authority may require you to sign an indemnity or complete a transfer of the right of burial. Please contact the burial authority separately to complete the process.
[(b)] If you are the nearest relative or representative of the deceased, but not the lair right-holder, you will require their permission to open the lair and written consent must be submitted with your application.

External Casket Measurements (in cm) (see guidance note on "External coffin/ ashes urn or casket measurements")	Overall length	
	Width at widest part (including any handles fully extended)	
	Width at narrowest part	
	Depth	
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: ……....
Company name and address:
……..…….
Business email address:
…….
Business telephone:
…….

Section 6: authorisation for burial (to be completed by the burial authority)

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)

……

Please confirm that the application is in order and that the burial can take place (please tick).

☐ I confirm that I have received the necessary documentation to allow the burial to take place. If any document is missing, please contact the applicant or their funeral director.
☐ 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: …….

SCHEDULE 4

Regulation 3

Form BF4

Application for burial of the remains of a pregnancy loss by health authority or body (shared or individual)

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

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 individual or shared burial of the remains of a pregnancy loss in Scotland, where the loss occurred on or before the end of the 24th week of gestation and showed no signs of life and the loss was for any reason (i.e. termination or miscarriage).

This application must be completed and signed by the person authorised to make the application for burial. Each pregnancy loss must be identified by the hospital or clinic ID number.

The application is made to the burial authority you want to carry out the burial. The burial authority is the organisation responsible for managing the burial ground where the burial is to take place. 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 what information is required, or what any part of the form means, you can speak to the funeral director who is making the arrangements, staff at the burial authority or to any other person who is arranging the burial.

Personal details of individuals contained in this form are not to be used for any other purpose.

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 ("the Act") and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act. 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: Application for the burial of the remains of a pregnancy loss(es)

The person applying for the burial is 'the applicant' and has the legal right to apply for the burial under section 78 of the Burial and Cremation (Scotland) Act 2016.

This section is used to record the details of the pregnancy loss(es) (please tick only one option below and move to relevant section(s)).

☐ This application is for the burial of an individual pregnancy loss (please complete section 1A).

☐ This application is for the shared burial of pregnancy losses (please complete section 1B).

Section 1A: individual burial of pregnancy loss

If a pregnancy loss is to be buried individually, no other pregnancy loss(es) are to be included on this form.

I, …….. (print name of applicant) on behalf of …….. (organisation) as the authorised and designated person, declare that I hold paperwork relating to the pregnancy loss listed below, signed by the medical practitioner/registered nurse/ registered midwife, and that the paperwork includes a declaration that the pregnancy ended before or on completion of its 24th week and that the pregnancy loss showed no signs of life.

	Container Number	Pregnancy Loss Unique Identifier
1		

Section 1B: shared burial of pregnancy loss

I, …… (print name) on behalf of ……..…. (organisation) as the authorised and designated person, declare that I hold paperwork relating to each of the pregnancy losses listed below, signed by the medical practitioner/registered nurse/ registered midwife, and that the paperwork includes a declaration that each pregnancy ended before or on completion of its 24th week and that each pregnancy loss showed no signs of life.

Container number ……..

	Pregnancy Loss Unique Identifier		Pregnancy Loss Unique Identifier		Pregnancy Loss Unique Identifier		Pregnancy Loss Unique Identifier
1		14		27		40	
2		15		28		41	
3		16		29		42	
4		17		30		43	
5		18		31		44	
6		19		32		45	
7		20		33		46	
8		21		34		47	
9		22		35		48	
10		23		36		49	
11		24		37		50	
12		25		38			
13		26		39			

Section 2: burial ground details

Name of burial ground	
Burial ground address and postcode	
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?	

Section 3: Applicant's declaration and consent

Declaration of entitlement to apply for burial

I declare that the details and information provided in this form are complete and correct to the best of my knowledge and that authorisation for the disposal has been obtained, in accordance with Part 3 of the Burial and Cremation (Scotland) Act 2016.

Signed: …….
Full Name: ……
Date: ……..
Organisation: ……
Address and postcode: …….
Phone number: …….

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

Section 4: authorisation for burial (to be completed by the burial authority)

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) ……

Please confirm that the application is in order and that the burial can take place (please tick).

☐ 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: ……..

SCHEDULE 5

Regulation 3

Form BF5

Application for burial of the remains of an adult or child by a local authority where they are making arrangements under section 87 of the 2016 Act

Burial number [official use only]		[burial authority logo and/or address]
Full name of deceased		
Name of burial ground		
Day and date of burial		
Time of service		

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 by a local authority to apply for the burial of the remains of an adult or a child where:
a) a person dies or is found dead within the area of the local authority; and
b) it appears that no arrangements have been or are being made for the remains to be buried or cremated.

This application form must be completed by a representative of the local authority. The application is made to the burial authority which is to carry out the burial. The burial authority will need to examine the form to make sure that it contains all of the necessary information. Missing information or information the burial authority does not think is accurate may result in the burial being delayed or refused. The local authority representative applying for the burial is 'the applicant' and has the legal right to apply for the burial under section 87 of the 2016 Act. 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 or to the funeral director who is making the arrangements.

Personal details of individuals contained in this form are not to be used for any other purpose.

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 ("the Act") and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act. 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.

Forms checklist

You should ensure that you have attached the necessary documents to this application form. The burial authority will need to have them to allow the burial to take place.

Required
☐ Certificate of Registration of Death

Section 1: Your information 'the applicant'
This section is used to record your details, as the representative of the local authority responsible for the burial. In completing this form you are the applicant for the burial.

Title	
Full name	
Position	
Local authority	
Business address	
Postcode	
Business telephone	
Business email address	

Section 2: Information about the person who died

Title	
Full name	
Name used on coffin plate (if different)	
Date of birth (DD/MM/YYYY)	
Death of death or date found dead (DD/MM/YYYY)	
Age at death	
Address	
Postcode	
Deceased's faith (if known)	
Place of death (if known)	
Name of hospital or practice where the doctor certified the death	

Section 3: burial ground details

Name of burial ground	
Burial ground address and postcode	
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)* ……

Section 4: Hazards

This section is used to record details of anything which might be a public health hazard or have an environmental impact on groundwater.

Are you aware if any of the following apply:

Does the body of the deceased pose a risk to public health: for example did the deceased have a notifiable infectious disease or was their body "contaminated" immediately before death?
☐ Yes ☐ No

Are there implant(s) present in the deceased?
☐ Yes ☐ No

Is there radioactive material or any other hazardous implant currently present in the deceased?
☐ Yes ☐ No

Is the deceased chemically embalmed (e.g. formaldehyde present)?
☐ Yes ☐ No

If you answered 'yes' to the questions above, please give further details.

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

Section 5: 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 6: funeral director details (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: ……..
Company name and address: ……
Business email address: …….
Business telephone: ……

Section 7: authorisation for burial (to be completed by the burial authority)

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) ……

Please confirm that the application is in order and that the burial can take place (please tick).

☐ I confirm that I have received the necessary documentation to allow the burial to take place. If any document is missing, please contact the applicant or their funeral director.
☐ 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: ……..

SCHEDULE 6

Regulation 3

Form BF6

Application for burial in a burial ground of body or whole body/body parts donated for anatomical examination on or after the date of commencement of the Anatomy Act 1984 (as amended by the Human Tissue (Scotland) Act 2006 (which is 14 February 1988))

Burial number [official use only]		Burial authority logo and/or address:
Name of 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 a burial of:
a whole body following an anatomical examination (where the body was donated on or after the commencement of the Anatomy Act 1984 as amended by the Human Tissue (Scotland) Act 2006 (14 February 1988)); or body parts which have been retained after an anatomical examination (where the body was donated on or after the commencement of the Anatomy Act 1984 as amended by the Human Tissue (Scotland) Act 2006 (14 February 1988)).

As the person who is applying for the burial, you are 'the applicant'. You must have the legal right to apply for the burial (see guidance note on "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 what information is required, or what any part of the form means, you can speak to the funeral director who is making the arrangements, staff at the burial authority or to any other person who is arranging the funeral.

Details of individuals contained in this form are not to be used for any other purpose

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 ("the Act") and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act. 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.

Forms checklist

You should ensure that you have attached all required documents to this application form based on where the death occurred. The burial authority needs to have them for the burial to take place. Please see guidance note on "Forms checklist", which sets out which documents are required.

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?	

Section 2: information about the deceased

Please complete one of the following sections, then the remainder of the form:

Section 2A – burial of a whole body following anatomical examination.
Section 2B – burial of body parts following anatomical examination.

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

Section 2A: application for burial of a whole body following anatomical examination

I confirm that the body described below was donated to …… (university name) on or after the commencement of the Anatomy Act 1984 as amended by the Human Tissue (Scotland) Act 2006 (14 February 1988).

Information about the deceased	
Title	
Full name	
Name used on coffin plate (if different)	
Date of birth (DD/MM/YYYY)	
Death of death (DD/MM/YYYY)	
Age at death	
Address	
Postcode	

I ……., (licensed person/ other authorised person[(a)] confirm on behalf of ……. (name of Authority lawfully retaining the body) that there is no reason for any further inquiry or examination concerning the body detailed above.

Section 2B: application for burial of body parts following anatomical examination

I ……. (licensed person/ authorised person) confirm on behalf of …… (name of Authority lawfully retaining the body parts) that there is no reason for any further inquiry or examination concerning the body parts.

I confirm they are now released for disposal and may be buried. I confirm that the body part(s) were retained from a body/bodies which was/were donated to (University Name) …… under the Anatomy Act 1984 as amended by the Human Tissue (Scotland) Act 2006.

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: ……

[(a)] The university may authorise a suitable person to complete Burial Form 6 (such as a Bequest Co-ordinator).

Section 4: Funeral director details
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) (see guidance note on "Coffin material")		
Coffin/ casket shape (see guidance note on "Coffin/ casket shape")		
External Coffin/ casket Measurements (in cm) (see guidance note on "External coffin or casket measurements")	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: ……..
Company name and address: ……..……
Business email address: …….
Business telephone: ……

Section 5: Authorisation for burial (to be completed by the burial authority)

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 I have seen the appropriate documentation to allow the burial to take place. If any document is missing, please contact the applicant or their funeral director.
☐ 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: ……..

SCHEDULE 7

Regulation 3

Form BF7

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 (as amended by the Human Tissue (Scotland) Act 2006 (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:
Name of 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 either:
a) Donated to a Scottish university for anatomical examination or teaching before commencement of the Anatomy Act 1984 as amended by the Human Tissue (Scotland) Act 2006 (14 February 1988) (donation and death before 14 February 1988).
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.

Details of individuals contained in this form are not to be used for any other purpose.

The information provided on this form is a legal requirement under the Burial and Cremation (Scotland) Act 2016 ("the Act") and will be processed in line with Data Protection legislation. The data will be held by the burial authority that is carrying out the burial. It will be held securely, in confidence and processed solely for the purpose of carrying out the burial. It will not be shared with any third party, subject to any requirement made by an inspector under section 91(1) of the Act. 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 ground 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)* ……..……
Any other requests or instructions?	

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 as amended by the Human Tissue (Scotland) Act 2006 (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

[a] A lair is a Scottish term for a burial plot or grave.
[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 details
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: ……
Company name and address: ……..
Business email address: ……
Business telephone: …….

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) ……

☐ 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: ……..

SCHEDULE 8

Regulation 4

BURIAL REGISTER

PART 1

Information where burial is of an adult or child

A. Details of deceased

- Title and full name of deceased
- Name used on coffin plate (if different to full name)
- Deceased's date of birth
- Deceased's date of death
- Deceased's age at death

B. Details of burial

- Name of burial ground burial carried out at
- Burial number/reference
- Day and date of burial
- Type of burial (coffin or ashes internment)
- Address of deceased
- Location in burial ground, e.g. section and lair number
- Funeral Director (if relevant)

PART 2

Information relating to a burial of body parts

A. Details of deceased

- Title and full name of deceased (if known)
- Name used on coffin plate (if different from full name)
- Deceased's date of birth (if known)
- Deceased's date of death (if known)
- Deceased's age at death (if known)

B. Details of burial

- Name of burial ground burial carried out at
- Burial number/reference
- Day and date of burial
- Date and place of burial or cremation of body
- Body parts being buried
- Location in burial ground, e.g. section and lair number

- Funeral Director (if relevant)
- Name and business address of person applying for the burial
- Name and business address of person signing the certificates

PART 3

Information where burial is relating to a stillbirth or pregnancy loss

A. Details of stillbirth or pregnancy loss

- Name of baby (if name has been given)
- Where the burial is applied for by a health authority—
    - Unique identification number
    - Name and business address of applicant

B. Details of burial

- Name of burial ground burial carried out at
- Burial number/reference number
- Day and date of burial
- Type of burial (pregnancy loss or stillbirth)
- Location in burial ground, e.g. section and lair number
- Funeral Director (if relevant)

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations make provision regarding burials in Scotland, in particular in respect of the application process for burials and the burial register. These Regulations are made for implementation of the Burial and Cremation (Scotland) Act 2016, which makes provision to regulate burial and places duties on burial authorities accordingly.

Regulation 2 makes provision about documentation which must be retained by burial authorities for a period of 50 years on a confidential basis.

Regulation 3 concerns the application process for burials. Applications must be in a prescribed form and contain the information specified in the relevant form (contained in schedules 1 to 7).

Regulation 4 prescribes the information which must be recorded in burial registers and places a duty on burial authorities to review each register from time to time and ensure that the information is accurate and up to date.

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