EXPLANATORY NOTE

(This Note is not part of the Regulations, but is intended to indicate their general purport.)

Section seven of the Cremation Act, 1902, required the Secretary of State to make Regulations prescribing, amongst other things, the form of the declarations to be made before cremation may take place, and requiring such declarations to be made under and by virtue of the Statutory Declarations Act, 1835, and the Regulations of 1930 so provided. By section two of the Cremation Act, 1952, the words relating to statutory declarations are repealed, and provision is made for every application for cremation to be verified in such manner as the Secretary of State may prescribe. These Regulations amend the Regulations of 1930 accordingly, and require an application for cremation to be countersigned by a person of one of the classes set out in the new Regulation 7 (3). Regulations 2 and 3 make provision consequential upon the repeal of the requirement as to statutory declarations, and Regulation 2 in addition makes amended provision so as to enable a medical referee, in the case of a person who has died in Scotland, to accept an application and certificates made or given in accordance with regulations in force in that country.

1952 No. 1639 (S. 84)

The Cremation (Scotland) Regulations, 1952

Made - - - -	*4th September,* 1952
Laid before Parliament	*8th September,* 1952
Coming into Operation	*26th September,* 1952

In exercise of the powers conferred on me by section 7 of the Cremation Act, 1902(**a**), as amended by Section 2 of the Cremation Act, 1952(**b**), and of all other powers enabling me in that behalf I hereby make the following regulations:—

1.—(1) These regulations may be cited as the Cremation (Scotland) Regulations, 1952, and shall come into operation on the twenty-sixth day of September, 1952.

(2) These regulations and the Cremation (Scotland) Regulations 1935(**c**), (hereinafter referred to as " the principal regulations ") may be cited together as the Cremation (Scotland) Regulations, 1935 and 1952.

(3) The Interpretation Act, 1889(**d**), shall apply to the interpretation of these regulations as it applies to the interpretation of an Act of Parliament.

2. For regulation 7 of the principal regulations there shall be substituted the following regulation:—

" 7. (1) Except as otherwise provided in these regulations, no cremation shall take place unless application has been made therefor to the cremation authority in accordance with this regulation.

(2) The application shall be made in Form A set out in the Schedule hereto and shall be made by an executor or by the nearest relative of the deceased:

(a) 2 Edw. 7. c. 8. (b) 15 & 16 Geo. 6 & 1 Eliz. 2. c. 31.
(c) S.R. & O. 1935/247; Rev. V, p. 296; 1935, p. 281.
(d) 52 & 53 Vict. c. 63.

Provided that it may be made by some other person if a satisfactory reason is given thereon why it is made by him and not by an executor or the nearest relative.

(3) The application shall be verified by being countersigned by—

(*a*) a Member of Parliament ;

(*b*) a Justice of the Peace ;

(*c*) a Minister of religion ;

(*d*) an advocate, barrister or solicitor ;

(*e*) a registered medical practitioner or a registered dental practitioner ;

(*f*) an officer on the active or half-pay or pension lists of any of Her Majesty's naval, military or air forces ;

(*g*) a person on the active or pension list of the permanent civil service of the Crown who is, or was at the date of his retirement, of the rank of clerical officer or equivalent or higher rank and is not less than twenty-one years of age ;

(*h*) a manager, teller or accountant of a bank ;

(*i*) a teacher at a school recognised by the Secretary of State or the Minister of Education or at a university or university college ;

(*j*) a police officer not below the rank of sergeant ;

(*k*) a member or the clerk of a local authority ; or

(*l*) the secretary of a trade union, or a registered friendly or approved society, or a branch of a trade union or a registered branch of a friendly society,

and the person countersigning shall specify in which of the aforesaid capacities he has signed and shall certify that the applicant is known to him and that he has no reason to doubt the truth of any of the information given by the applicant."

3. For the Form A set out in the Schedule to the principal regulations there shall be substituted the Form set out in the Schedule to these regulations.

4. For the first paragraph of regulation 13 of the principal regulations there shall be substituted the following paragraphs :—

" 13. An application shall be deemed to be made in accordance with these regulations if

(*a*) in the case of the remains of a person who has died in England or Wales, the application is made in accordance with regulations made under section 7 of the Cremation Act, 1902, as amended by the Cremation Act, 1952, and section 10 of the Births and Deaths Registration Act, 1926(**a**), or

(*b*) in the case of the remains of a person who has died in any other place furth of Scotland, the application contains the particulars required in Form A and is accompanied by a declaration by the applicant that all the particulars given therein are true to the best of his knowledge and belief, made before any person having authority in that place to administer an oath or to take a declaration.

In the case of the remains of a person who has died in any place furth of Scotland, the Medical Referee may accept certificates containing the information required in Forms B, C and D, if signed by medical practitioners who are shown to his satisfaction to possess qualifications substantially equivalent to those prescribed for each certificate by these regulations."

(a) 16 & 17 Geo. 5. c. 48.

5. In regulation 19 of the principal regulations the words " statutory declarations " shall be omitted in both places where they occur.

Dated this 4th day of September, 1952.

James Stuart,
One of Her Majesty's Principal Secretaries of State.

St. Andrew's House,
Edinburgh, 1.

SCHEDULE

FORM A

Application for Cremation

I, (*Name of applicant*).....
(*Address*) .....
(*Occupation*) .....
apply to the (*here insert name and address of the Cremation Authority*).....
.....
to undertake the cremation of the remains of
(*Name of deceased*) .....
(*Address*) .....
(*Occupation*) .....
(*Age*) ..... (*Sex*) .....
(*Whether married, widow, widower, or unmarried*) .....

The true answers to the questions set out below are as follows:—

1. Are you an executor or the nearest relative of the deceased?

2. If not, state
(*a*) Your relationship to the deceased. (*a*)
(*b*) The reason why the application is made by you and not by an executor or any nearer relative. (*b*)

3. Did the deceased leave any written directions as to the mode of disposal of his remains? If so, what?

4. Have the near relatives* of the deceased been informed of the proposed cremation?

* The term "near relative" as here used includes widow or widower, parents, children above the age of 16, and any other relative usually residing with the deceased.

5. Has any near relative of the deceased expressed any objection to the proposed cremation? If so, on what ground?

6. What was the date and hour of the death of the deceased?

7. What was the place where deceased died? (Give address and say whether own residence, lodgings, hotel, hospital, nursing home, etc.)

8. Do you know, or have you any reason to suspect, that the death of the deceased was due, directly or indirectly, to
(*a*) violence;
(*b*) poison;
(*c*) privation or neglect?

9. Do you know, or have you any reason to suspect, that the death of the deceased occurred while he was under an anaesthetic?

10. Do you know any reason whatever for supposing that an examination of the remains of the deceased may be desirable?

11. Give name and address of the ordinary medical attendant of the deceased.

12. Give names and addresses of the medical practitioners who attended deceased during last illness.

I declare that to the best of my knowledge and belief the information given in this application is correct and no material particular has been omitted.

Date ..... (Signature) .....

The applicant is known to me and I have no reason to doubt the truth of an of the information furnished by the applicant.

Date ..... (Signature) .....

(Capacity in which signatory has signed).....

(Address) .....

EXPLANATORY NOTE

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