

# FORM C

## CONSENT : DECEASED PERSON(S)

FOR TOWN/PARISH COUNCIL ATTENTION:

THIS AUTHORISATION NEEDS TO BE COMPLETED BY A RELATIVE OF THE PERSON AFTER WHOM THE STREET IS BEING NAMED AND FORWARDED TO THE DEVELOPER TO BE SUBMITTED AS PART OF THE APPLICATION.

# CONSENT FOR NEW STREET(S) TO BE NAMED AFTER DECEASED PERSON(S)

*Please note: This form should only be completed where the person has been deceased for less than 50 years, otherwise no authorisation is required.*

Dear Sir/Madam

Development at: \_\_\_\_\_

I am happy to give my consent for Wiltshire Council to name a street after my relative on the above development.

Name of deceased: \_\_\_\_\_ (BLOCK CAPITALS PLEASE)

Date of Death: \_\_\_\_\_

Relationship to deceased: \_\_\_\_\_

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_