

# FORM C

## CONSENT : DECEASED PERSON(S)

**NOTE FOR TOWN/PARISH COUNCIL:** IF APPLICABLE, THIS AUTHORISATION NEEDS TO BE COMPLETED BY A RELATIVE OF THE PERSON AFTER WHOM THE STREET IS BEING NAMED. ONCE COMPLETE IT SHOULD BE FORWARDED TO THE DEVELOPER TO BE SUBMITTED AS PART OF THEIR 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.

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

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

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

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

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

**NOTE TO DEVELOPER:** If applicable, this form must also be included with your completed application