

Advice from Scottish Government April 2019

For those cremation authorities which work with university anatomy schools and cremate their cadavers, a school recently highlighted to us that in the previously circulated Form A6, on page 3 in Section 1, the place of death box had not been entered by our designers. They have corrected this and for printing purposes can all cremation authorities please use this attached version going forward. However, this minor error will not mean any Form A6's you currently have printed and ready are unusable – where applicable the universities are aware and can write the information in the space as required. As stocks are used up, they can be replaced with the attached.

For all cremation authorities, we would also like to take the time to specifically highlight here the new cremation registers all crematoriums will be required to keep. These are explained in the regulations guidance note previously circulated and have been highlighted in every meeting we've attended so far. The manner in which these registers are kept is not prescribed and up to each cremation authority. However, reflecting current practice, it may be you record and store them in the same manner as current registers. Beyond the 4th, the Inspector will be able to provide advice or comment on your registers during visits to each crematorium.

For ease of reference the information required for each register as set out in regulation is as follows.

Whole Bodies ('Form B1')

Cremation number
Date of cremation
Name of the deceased
Sex of the deceased
Date of birth
Date of death
Funeral director
Dispersal of ashes information (and changes and dates)

Body Parts ('Form B2')

Cremation number
Date of cremation
Name of the deceased
Address of the deceased
Sex of the deceased
Date of birth
Date of death
Date and place of burial or cremation of body
Body parts being cremated
Name and address of person applying for cremation
Name and address of person signing certificates
Dispersal of ashes information (and changes and dates)

Stillbirth and Pregnancy Loss ('Form B3')

Cremation number

Date of cremation

NHS number* (a)

Name** (b)

Name and address of the applicant* (c)

Dispersal of ashes information (including if none were recovered)

*Complete (a) and (c) only if cremation is applied for by a health body/authority.

**Complete (b) with name given to the baby (if one has been given).