

ANNEX A: REQUEST FOR PERMISSION TO USE A MOD INSIGNIA ON A PRIVATE MEMORIAL

Please write in Black Ink in **Block Capital Letters**.

*Mandatory fields must be completed

REQUESTOR DETAILS

Please provide the following conta	act details.
**Ideally, an email address should United Kingdom	d be provided particularly when a request is being made from outside the
FORENAME(S)*	
SURNAME*	
ADDRESS	
HOUSE NUMBER*	
STREET*	
TOWN*	
COUNTY*	
COUNTRY*	
POST CODE*	
TELEPHONE *	
EMAIL ADDRESS**	

THE DECEASED DETAILS

Please provide the following details of the deceased for whom the request is being made.

Completion of fields marked *** are not essential but may speed up the approval process.

<u>www.gov.uk/get-copy-military-service-records/overview</u> provides information on obtaining copies of military service records.

If you possess any documents that confirm the deceased's military service, such as a discharge certificate or record of service, please forward a copy with your application.

FORENAME(S)*	
SURNAME*	
PREVIOUS SURNAME(S)	
SERVICE*	
REGIMENT/UNIT	
RANK***	
SERVICE NUMBER***	
DATES OF SERVICE*** (Approximate)	
MEMORIAL DETAILS	
CEMETERY NAME*	
STREET*	
TOWN*	
COUNTY*	
COUNTRY*	
POST CODE*	

MOD INSIGNIA REQUESTED*		
Please check the Use of MoD Insignia on Private Memorials booklet for advice on the crests the MoD will issue.		
MEMORIAL SUPPLIER		
If known, the name and address o Badge.	f the company or tradesperson who will be recreating the Crest or Unit	
BUSINESS/COMPANY NAME		
BUILDING NUMBER		
STREET		
TOWN		
COUNTY		
COUNTRY		
POST CODE		
TELEPHONE		
EMAIL ADDRESS		
NEXT STEPS		
Email this Form to: dbs-jcccgroups Or Post to: DBS, JCCC Graves Ca	mailbox@mod.gov.uk asework, G35, Innsworth House, Imjin Barracks, Gloucester. GL3 1HW.	
INTERNAL USE ONLY		
FILE REFERENCE		
CASE OFFICER		
DATE ACTIONED		
NON-STANDARD REQUEST		