

Kinneigh Graveyard Survey - Grave Marking Information Recording Form

Stone Location	Condition (please tick ✓)	Inscription Condition
Grid Reference: <input style="width:40px; height:30px;" type="text"/> <input style="width:40px; height:30px;" type="text"/> ID Number: <input style="width:50px; height:30px;" type="text"/>	Good <input type="checkbox"/> Tilted <input type="checkbox"/> Sunk <input type="checkbox"/> Fallen <input type="checkbox"/> Split <input type="checkbox"/> Damaged <input type="checkbox"/>	Legible? Yes <input type="checkbox"/> No <input type="checkbox"/> Decoration? Yes <input type="checkbox"/> No <input type="checkbox"/>

Memorial Class (Type of grave marking) please tick appropriate box: ✓

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cut Stone / Headstone	Rough Slab	Cross	Tomb	Other (Please specify) <input style="width:100px;" type="text"/>	

Material: Stone Marble Concrete

Colour:

Height/Width (at base): High Wide

Is grave enclosed? By Kerb? By Railings?

Inscription details:

	DATE OF DEATH	AGE
Name 1: <input style="width:100px;" type="text"/> <input style="width:100px;" type="text"/>	<input style="width:40px;" type="text"/>Yrs
Address: <input style="width:100px;" type="text"/> <input style="width:100px;" type="text"/> Co. <input style="width:40px;" type="text"/>		
Relation of Name 2 to Name 1:		
Name 2: <input style="width:100px;" type="text"/> <input style="width:100px;" type="text"/>	<input style="width:40px;" type="text"/>Yrs
Address: <input style="width:100px;" type="text"/> <input style="width:100px;" type="text"/> Co. <input style="width:40px;" type="text"/>		
Relation of Name 3 to Name 1:		
Name 3: <input style="width:100px;" type="text"/> <input style="width:100px;" type="text"/>	<input style="width:40px;" type="text"/>Yrs
Address: <input style="width:100px;" type="text"/> <input style="width:100px;" type="text"/> Co. <input style="width:40px;" type="text"/>		

(If more writing space is required, please continue on back of form)

Erected by:

EXACT WORDING OF INSCRIPTION:

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Contact Name and details: **Date:**

Address:

Tel. no: **Email:**

NOTES (FOR OFFICE USE ONLY)

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Kinneigh Graveyard Survey undertaken by:
 Coppeen Archaeological, Historical and Cultural Society
 with the generous support of the local community
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Contact details:
 Address: Coppeen, Enniskeane, Co Cork
 Email: info@coppeenheritage.com
 Tel: 026-46078
 Web: www.coppeenheritage.com