Application for a Burial Plot

Plot No.							
	(name of cemetery)						
Name of Deceased:							
	(family name)	(first name		other given names)			
	,	•	,	,			
Marital status:	[] single[] married	[] widowed					
Marital Status.	[] single[] mamed	[] Widowed					
	- 1	65					
Date of Death: Place of Death:							
(M)	_mm_dd\		(town/city)	(nrovince)			
Applicant:							
, .pp.://eartic	(name)	_	(relationship	<u> </u>			
	(name)		(relationship	<i>)</i>			
Mailing address:							
	(P.0. box no./street)	(town/city)	(province)	(postal code)			
Declaration of Applic	<u>cant:</u>						
1	hereby o	declare that I hav	e received a cop	y of the			
	Cemeter	ry bylaws and/or	policy.				
		Date [.]					
		Office use only					
Application received	I and approved on this _	<u>-</u>		. 20			
Fees paid:	Receipt no						
Per							
Date Burial Permit Received:			Initial:				
Date of data entry:			Initial:				
Date marked on map:			Initial:				

Refund of Deposit on Burial Plot

[NAME AND ADDRESS OF CEMETERY]

Applicant's Inform	nation						
Name:							
	(family name)	(first name)		(other given names)			
Mailing address:							
	(P.0. box no./street)	(town/city)	(province)	(postal code)			
Please refund the c	made for buria	l plot #	in the name of				
				<u>_</u> .			
Signature of Applicant:							
Date:							
Signature							
Office use only							
Application received and approved on this day of, 20							
Approved by:							
Name:	Name: Office/Position:						
Signature:		Date:					
Refund amount: Cheque no							
Date:							