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

Date of Death: _____   Place of Death: _____
              (yyyy-mm-dd)   (town/city)   (province)

Applicant: _____   _____
                  (name)   (relationship)

Mailing address: _____
           (P.0. box no./street)   (town/city)   (province)   (postal code)

Declaration of Applicant:

I _____ hereby declare that I have received a copy of the

_____ Cemetery bylaws and/or policy.

_____   Date: _____

Refund of Deposit on Burial Plot

[NAME AND ADDRESS OF CEMETERY]

Applicant's Information

Name: _____

(family name)   (first name)   (other given names)

Mailing address: _____

(P.0. box no./street)   (town/city)   (province)   (postal code)

Please refund the deposit of $_____ made for burial plot #_____ in the name of

_____.

Signature of Applicant:

_____   Date: _____

Signature

Office use only

Application received and approved on this _____ day of _____, 20 ____

Approved by:

Name: _____   Office/Position: _____

Signature: _____   Date: _____

Refund amount: _____   Cheque no. _____

Date: _____