

Fee: \$25.00

## PLOVER CEMETERY

### BURIAL PERMIT

Lot Owner Name \_\_\_\_\_

Lot Owner Address \_\_\_\_\_

\_\_\_\_\_

Burial Location: Lot # \_\_\_\_\_ Section \_\_\_\_\_

Decedent's Name \_\_\_\_\_

Standard Burial \_\_\_\_\_ Cremation \_\_\_\_\_

Date of Death \_\_\_\_\_

Date of Burial \_\_\_\_\_

Funeral Home \_\_\_\_\_

Funeral Home Address \_\_\_\_\_

\_\_\_\_\_

Funeral Home Contact person \_\_\_\_\_

Funeral Home Contact Phone \_\_\_\_\_

Permit Fee Paid \$ \_\_\_\_\_

Date Paid \_\_\_\_\_

Received by \_\_\_\_\_