PERMIT # _____

UNITY PLEASANT VIEW CEMETERY

APPLICATION FOR CEMETERY PERMIT

Date: _____

NAME OF APPLICANT _____

ADDRESS _____

PHONE NUMBER _____(HOME) _____(BUSINESS)

FAX _____

NAME OF INSTALLATION COMPANY OR INDIVIDUAL _____

ADDRESS _____

PHONE NUMBER _____

RE: LATE _____ GRAVE LOCATION_____

OLD OR NEW SECTION OF CEMETERY
(CIRCLE)

DESCRIPTION OF WORK TO BE DONE
* No foundation required on grave locations with pathways already installed
* Foundation MUST be level with ground
* Headstone must be within plot dimensions
*Full cemetery policy can be requested.

HAS PERMISSION OF RELATIVE BEEN GIVEN FOR THIS WORK? _____

_____   _____
APPROVED BY   SIGNATURE OF APPLICANT
DIRECTOR OF PARKS & RECREATION

                                       _____
                                       PRINT NAME OF APPLICANT

NOTE: **An approved Cemetery Permit MUST be obtained BEFORE any
                   work is performed at the Cemetery. Work done without approval is
                   subject to removal at installers expense.
                   Any damage to grave covers due to regular cemetery maintenance
                   will be the responsibility of the family.**

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