

### INTERMENT ORDER AND AUTHORIZATION

Location	Interment #	Date
----------	-------------	------

No interment shall take place until authorized by the Owner of the interment right and the Legally Authorized Person for the Decedent.

Name of Cemetery
------------------

Name of Decedent		Age	Gender	Male	Female
Date of Birth	Date of Death		Veteran	Yes	No
Interment Right Owner		Phone # ( )			
Interment Right (describe)		Purchased	Preneed	At-need	
Funeral Home	Director	Telephone Number			
Funeral Home Address	City		State	Zip	
Place of Funeral Service	Day	Date (mo/day/year)		Time of Service	
Type of Cemetery Service	Day	Date (mo/day/year)		Time of Service	
Outer Burial Container Description	Manufacturer		Provided By		
Memorial Description	Manufacturer		Provided By		

Remarks: _____			
Interment Fee: \$ _____ Other Charges: \$ _____ Total: \$ _____			
Family Verification: _____		Date: _____	
The undersigned hereby certify that they are the owner of the interment right described herein and the Legally Authorized Person for Decedent and hereby authorize the interment of the Decedent's remains. The cemetery is hereby authorized to install any outer burial container purchased in connection with the interment right described herein.			
The undersigned agree that the cemetery shall have the right to correct any error in this interment, at its own expense, without any liability for such error.			
In the event Decedent's remains are disinterred, the undersigned agree to be responsible for any and all fees and costs associated with the disinterment.			
The undersigned hereby agree to indemnify and hold harmless the cemetery, its owners, affiliates, officers, directors, employees and agents from any and all claims, damages, liabilities, losses, costs, expenses or causes of action (including reasonable attorney's fees and expenses of litigation) from any and all liability including reasonable attorney's fees, and against any loss it or any of them may sustain in connection with the interment authorized hereunder, including any damage sustained as a result of the water table or water encroaching on any interment.			
Must be signed by (1) interment right owner AND (2) Legally Authorized Person.			
Signature of Interment Right Owner	Date	Signature of Legally Authorized Person	Date

Official Use Only:

Section:	Plot Number:	Surveyed by:
Survey Marker:	Measurement 1:	Measurement 2:
Verified by:	Interment by:	Tag Number: