

# City of Elberton Burial Request Form

(24 hour notice required)

Information of the Deceased	
Full Name	
Last Address	
Birth Date	Death Date
Place of Death	
Surviving Spouse's Name (if applicable)	

Funeral Home Information		
Name of Company		
Address		
Phone Number	Contact Person for Service	Mobile Number

Service Information		
Date	Time	Planned Arrival Time at Cemetery
Location of Service		

Burial Location				
Cemetery	Section/Addition	Lot No.	Grave No.	Cremains only? (Yes/No)
Lot Owner/Owner of Interment Rights				
Address for Owner of Interment Rights				
Phone Number of Owner		Relationship of Owner to Deceased		
Vault Size (Length x Width)		Family Name on Monument, if any present		

Certification of Request		
<p>I, the undersigned, being the person(s) responsible for the funeral arrangements of the above-named deceased, DO HEREBY REQUEST the City of Elberton to open the grave space described herein and the body of the deceased interred. I certify that I am empowered to authorize the opening of the grave and that the body should be rightly interred therein. I, the undersigned, DO HEREBY INDEMNIFY and hold safe and harmless the City of Elberton, its agents or employees, against all actions, proceedings, claims, demands, costs, losses or expenses whatsoever which may be made or instituted against or suffered by the abovementioned deceased.</p>		
Name of Person Certifying	Relationship to Deceased	Date of Signatures
Signature of Person Certifying	Signature of Funeral Service Provider	