## **APPLICATION TO ERECT MEMORIAL**

(Please use ink or complete digitally)

DIOCESE:	PLACE:				
TO:		CEM	ETERY		
Application is hereby made for permission to erect a memorial and for reverse of this application and to permit the monument dealer who significant to the monument dealer who significant to the control of the control					
THIS MEMORIAL WILL HAVE A ROMAN CATHOLIC EMBLEM ON IT INCONSISTENT WITH ROMAN CATHOLIC DOCTRINE AND PRACT		OT HAVE ON IT ANY EMBLEM, INSIGNIA OR INSCRI	PTION		
IT IS UNDERSTOOD THAT ALL MEMORIAL WORK IS SUBJECT TO OR ANY OTHER STRUCTURES OR MEMORIALS, THEIR MANUFA OTHER RULES AND REGULATIONS OF THE CEMETERY NOW IN	CTURE, LOCATION, CARE, ERECTION, REM	WAY AFFECTING MONUMENTS, MARKERS, HEADS 10VAL OR IN ANY OTHER REGARD, SUBJECT TO AL	STONES _L		
Should any memorial, in the opinion of the director or superintendent, either to correct the condition or to remove the same at the expense on file in the cemetery office.	0 3, 1		0		
The undersigned, who represents that he, she, or they, is or are the se authorizes and requests the director or superintendent of the above-mand the construction of a foundation, if necessary, and does hereby a	nentioned cemetery to permit the erection of the	e memorial as described on the reverse side of this appl	lication,		
(Signature of lot owner.)	ADDRESS	ZONE			
(Signature of lot owner.)	ADDRESS	ZONE			
(Signature of heir. State relationship to owner.)	ADDICESS	ZONE			
	ADDRESS				
MONIIM	ENT DEALER AGREEM				
I certify that I have been authorized by the person making this applica contains the specifications and detailed sketch of this memorial.			ıt		
I certify that this memorial is made entirely of first-grade material and will be of the highest standard. Should a defect in material or workman its director shall make such declaration in writing to the monument de	nship become apparent before the lapse of five	years from date of setting, the cemetery management			
I hereby agree to abide by the rules and regulations of this Cemetery now in force or hereafter adopted, in the erection of the memorial work in the abovementioned Cemetery, and further agree that, if in the opinion of the director or superintendent should the completed memorial not comply with said rules and regulations, it will, at the request of the director or superintendent of the Cemetery, be removed by me within three days of such request, without cost to the Cemetery or the Lot Owner.					
The undersigned further agrees to hold the Cemetery free from any liability whatsoever for damage to the memorial that may result from the installation of said memorial before, during or after the setting of said memorial.					
I hereby agree to pay for any damage to lots, graves, walks, trees, sh and save harmless the Cemetery upon, or from, any and all claims, do			y, defend		
No Memorial, once erected, may be removed from the Cemetery with	out written permission of the Cemetery director	or superintendent.			
No tools, equipment, structure, etc., required in the erection of the me the Cemetery.	morial may be left overnight in the Cemetery w	ithout the written permission of the director or superinte	ndent of		
Acceptance of this permit by the Cemetery and the payment for found	dation charges or other paymenls do not constit	ute complete approval of this application.			
Sig	gnature of Memorial Dealer				
Ad	ldress				
DATE					
THE ADDITION IS ADDROVED WITH THE CONDITION TH	LAT THE MEMODIAL IS SUBJECT TO THE EN	IAL INSPECTION OF THE DIRECTOR OF			

THIS APPLICATION IS APPROVED WITH THE CONDITION THAT THE MEMORIAL IS SUBJECT TO THE FINAL INSPECTION OF THE DIRECTOR OR SUPERINTENDENT. SHOULD THIS MEMORIAL IN THE JUDGMENT OF THE DIRECTOR OR SUPERINTENDENT NOT COMPLY IN FULL WITH THE ABOVE SPECIFICATIONS THE MEMORIAL MUST BE RECTIFIED TO SO COMPLY OR BE REMOVED FROM THE LOT BY THE MEMORIAL DEALER AT THE REQUEST OF THE DIRECTOR OR SUPERINTENDENT WITHIN THREE DAYS OF SUCH REQUEST.

## **SPECIFICATIONS**

Grave	_Lot	Block	Section	Area of Lot			
Kind of Material	Trade	Name	Color				
Quarrier		Address					
TYPE OF FINISH: Front		Back (No sawed or rough backs permitted.)					
Тор		(No sawed or rough backs permitted.)  Ends					
LETTERNIC CANAL III III III II	10						
LETTERING ONLY: How will lettering read?							
MONUMENT: Base size:	Die size:	Other pieces:	Total front fa	ace area:sq. ft.			
MARKER: Size:	Grave	of:		Grave no			
Size:	Grave	of:	(	Grave no			
CARVING AND LETTERING: Specify Method for:							
Family Name:	Individual Name:						
Inscriptions:		Ornamentation:					
SKETCH OF MEMORIAL TO BE PLACED SHOF DIE AND BASE, (Sketch should be drawn							
Date received:Invoice No. Date Foundation Built:	:						
Application Approved:	Monument Marker Lettering Only						