

# Interment Rights Agreement

## Interment Authorization



Date of Authorization for Interment: \_\_\_\_\_

Rights Holder Name:	
Address:	
Contact Info:	Phone:
	Email:

### Authorizing the Interment of:

<b>Name:</b>	
<b>Name:</b>	
<b>Name:</b>	
<b>Name:</b>	
<b>Name:</b>	
<b>Name:</b>	

### Interment Right Location

Section:		Row:		Plot:		Lot(s):	
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Signature of Rights Holder: \_\_\_\_\_

Cemetery Operator's Signature: \_\_\_\_\_