



CEMETERY PLOT FORM

CEMETERY NAME: _____

NAME OF DECEASED: _____

PLOT NUMBER: _____

DATE OF PURCHASE: _____

Sex: M / F AGE: _____ VETERAN: Y / N

Urn Placement:

Date of Birth: _____
Day Month Year

Date of Death: _____
Day Month Year

Date of Interment: _____
Day Month Year

SW	NW
SE	NE

Multiple Interment: Yes/No Casket Cremation Double Depth (DD)

Maximum Burial Options per Plot: **2 Caskets** or **4 Urns** or **1 Casket plus 4 Urns.**

Personal Representative: _____ Relationship: _____

Address: _____

Phone: _____ Email: _____

Funeral Home: _____

Address: _____

Phone: _____ Email: _____

Kneehill County will mark the requested plot. It is the family or funeral home's responsibility to arrange the opening and closing of the gravesite and the family's responsibility to maintain markers or monuments.

Cost: \$ _____ + GST= \$ _____ Method of Payment: Visa/MC Cash Debit

Signature of Seller

Signature of Purchaser