

Village of Waverly Cemeteries

Application To Erect Memorial/Headstone or Foundation

To _____ Cemetery

Application is hereby made for permission to erect memorial / headstone or flat plaque and install a proper foundation under such at the following location:

Grave _____ Lot _____ Division _____ Section _____

And to permit the monument dealer who signs this application to furnish the all material necessary.

Should any memorial / headstone in the opinion of the Village Board or Cemetery Superintendent, become unsightly, dilapidated or dangerous to visitors, It is understood that the Village shall have the right either to correct or remove the same at the expense of the lot owner or his or hers heirs, after giving due notice in writing to last know address of the lot owner on file with the Village.

The undersigned, who represents that he, she or they, is or are the sole and exclusive owner(s) of the right of sepulture in the grave or lot described above hereby authorizes and requests the Village or Cemetery Superintendent of the above mentioned Cemetery to permit the erection of the memorial / headstone as described on the reverse side of this application, and the construction of a foundation and does hereby agree to all the terms, conditions and other provisions as set forth on both sides of this application, All applicable fees are the responsibility of person (s) requesting application.

Signature of Lot Owner(s) Address Phone No.

Signature of Heir(s) Address Phone No.

Village of Waverly, N. Y.
Cemetery Memorial Warrant

Name of person completing this form: _____

Service Plaque : Please fill only section 1

1. Deceased details:

Name : _____ **Date of death :** _____ / _____ / _____

Cemetery: _____ **Division** _____

Block/ Row: _____ **Plot** _____

Burial _____ **Ashes** _____ **Memorial/ Plaque only** _____

2. Base and Memorial:

Base Material: _____

Dimensions: Height _____ **Width** _____ **Depth** _____

Memorial Material: _____

Dimensions: Height _____ **Width** _____ **Depth** _____

Method of securing memorial to base _____

3. Please submit drawing for reviewing

4. Contract details of person to install memorial

Name: _____ **Phone Number:** _____

Date to be installed: _____ / _____ / _____

5. Contract details of person to maintain the memorial

Name; _____ **Phone Number** _____

Address: _____

Signature: _____ **Date** _____ / _____ / _____

Office Use Only

Date Received _____

Approved by _____

Date Foundation Installed _____

Fee _____

Dealers Approval Copy

Approved by _____

Date _____

Lot _____ Div. _____ Row _____ Section _____

Memorial / Headstone :

Name _____

**Note : Dealer Is Responsible For Obtaining This Copy Prior To Delivering Any
Memorial / Headstone or Installing any Foundation**