

ORDER FOR INTERMENT

To The Proprietors of The Exeter Cemetery

Date _____

You are hereby authorized to inter, subject to your Rules and Regulations, the remains of

_____ who was a resident of _____

Information regarding death, birth, and interment is given below.

| | DEATH | BIRTH | INTERMENT | Location and depth of BURIAL in lot to be as follows: | | | |
|-------|-----------|-----------|-----------|---|-------|--------|------|
| Date | | | | | | | |
| Hour | * * * * * | * * * * * | | | | | |
| Place | | | Lot | | | | |
| | | | | Age at time of death | YEARS | MONTHS | DAYS |

The relationship of the deceased to owner of the lot is _____

I, the undersigned, hereby certify and represent that I am the legal custodian of the remains and have the right to make this authorization, and that I am related to the deceased as indicated below. I further agree to hold the PROPRIETORS OF THE EXETER CEMETERY harmless from any liability on account of said authorization.

Signature of legal custodian

Relationship of signer to deceased

Address

I hereby authorize* the above interment

Signature

Relationship or other capacity

Address

*NOTE - In addition to the signature of the person having legal custody of the remains, this order must be signed by either the Representative or an owner of the lot or other interment space in which interment is to be made or, if none, then by a legally authorized representative.

Funeral Director _____

FEEES PAYABLE IN ADVANCE