

CEMETERY CONSENT FORM

I (We) hereby give our consent for the disinterment and removal of _____ who is buried in _____.
(Name of Deceased) *(Plot & Block)*

Our records indicate that the plot owner(s) is/are _____.

Signature *Date*

Title

Name of Cemetery

PLOT OWNER CONSENT FORM

I (We) hereby certify that we are the owner(s) of record _____
(Plot)
in _____ either by purchase or inheritance and we hereby
give our permission of the disinterment of _____ who is buried
in that plot.

Signature of Owner *Date*

Address

Phone Number

NEXT-OF-KIN CONSENT FORM

I hereby certify that I am the _____ of _____.
(Relationship) *(Name of Deceased)*
There are no other living relatives that precede me in the degree of kindred; and I give my
permission for the body to be disinterred and moved to _____.
(Name of Cemetery Where Body is to be Interred)

Signature *Date*