## Town of Elkin Elkin Recreation & Parks Department PO Box 345

Elkin, NC 28621 Phone: 336.794.6478 Fax:336.794.6494

## INTERMENT AUTHORIZATION FORM

HOLLYWOOD CEMETERY: No interment shall take place until a written authority, signed by the proper relative or legal representative of the deceased has been provided to the Town of Elkin, By signing, you are authorizing the Town of Elkin and Elkin Recreation & Parks Department that you are a controlling authority of the property.

| Full Name of Deceased             | <del>1</del> :                    |   |                       |
|-----------------------------------|-----------------------------------|---|-----------------------|
| Date of Birth:                    |                                   | Date of Death:  |                       |
| Name of Funeral Servi             | ce:                               | Name of Funeral Service C   | Contact:              |
| Funeral Service Phone:            | :                                 | Funeral Service Fax:  |                       |
| Type of Container bein            | g used:                           | Plot #: Lo  | ot #                  |
| Section Description               |                                   | Plot Description:   |                       |
| Date of Interment/Gra<br>Service: |                                   | be the intended location of the interment of the right of "name")                     | within the plot. (eg. |
|                                   | ipon the representation made in t | gulations, to open the above specified loc<br>his application is NOT making a decisio |                       |
| Print Name                        | Signatu                           | nre   | Date                  |
| Address                           | City                              | \$  | State                 |
| Zip Code                          | Phone Number                      | Email address   |                       |