



**Town Of Hempstead DGS -GREENFIELD
APPLICATION FOR INTERMENT**

SUBMISSION OF THIS FORM DOES NOT FINALIZE BURIAL ARRANGEMENTS. GREENFIELD STAFF WILL CONTACT YOU TO FINALIZE BURIAL ARRANGEMENTS UPON APPROVAL OF THIS FORM.

Applicant Information

Name of Applicant:
Relationship to Applicant:
Relationship to Deceased:
Applicant Address:
Applicant Town Zip:
Applicant Phone:
Applicant Email:
Deed Presented:

Deceased Information (Funeral Director to Complete)

Date of Burial:
Requested Time of Burial:
Name of Deceased:
Section, Plot, Grave for Interment:
Funeral Home:
Funeral Director:
Funeral Director Phone:
Casket Dimensions(Exterior):

Plot Ownership Information

Name of original plot owner:
Deceased relationship to plot owner:
Is person named on deed (original owner) deceased:
If there is no surviving heirs indicate here:

Section Lot Grave #:
Date of Original Purchase:
Name of Plot Owner's Spouse (If Applicable):
Is the spouse deceased? Date: Place of Burial:

If so, list name of the surviving spouse and all children, or other next of kin with burial rights, below

Name:	Address:	Relationship to original owner:

I am the applicant above named. I hereby apply to Greenfield for a permit *inter the body/cremated remains* of the above referenced deceased in the Section, Plot, Grave listed above. I hereby agree to indemnify and hold harmless the Town of Hempstead against any and all claims arising from the petition.

Signature of Applicant:

Greenfield Staff Confirmation	Name	Date
Information Confirmed by:		
Section Plot Lot Confirmed By:		
Approved By:		
Burial Date and Time Scheduled:		