

## Palm Cemetery Burial Space Claim Form

INFORMATION ABOUT THE CLAIMANT (YOU)									DO NOT WRITE IN THIS BLOCK	
LAST NAME	:	FIRST NAME				M.I.	STAFF USE ONLY			
STREET ADI	DRESS		CITY							
STATE ZIP				EMAIL	1				Date Claim Received	
STATE ZIF			LIVIAIL							
PHONE		DATE OF BIRTH		PLACE OF BIRTH  CIVIL UNION OR				Date Space Notice Posted in		
MARITAL STATUS (check one): MOTHERS' MAIDEN NAME, DATE &		SINGLE	MARRIED					WIDOWED	Newspaper	
PLACE OF B FATHERS' M PLACE OF B	MAIDEN NAME, DATE &								Last Date of Contact if any	
		INF	ORMATION A	BOUT YOUR C	LAIM				Office Notes	
PART I.	I am making a cl		Palm Cemetery Block Lot					Lot		
BURIAL SPACES OWNE				RECORD						
PART II.					I am the owner of record of the burial spaces proposed for claim. I am providing ownership paperwork issued in my name; or official					
					cords list my na					
					to the owner our claiming ow				Original Purchase Date	
				ER OF RECORD IS MY: (specify below if spouse, father, mother,						
PART III.	II. CLAIM IS BASED ON DESCENT. IF YOU grandmother ARE THE OWNER OF RECORD, PROCEED TO PART IV.				er, grandfather, etc. Provide proof of lineage/relationship)					
ARE YOU AWARE OF ANY RELATIVES THAT SHARE THE SAME OR CLOSER RELATIONSHIP TO THE OWNER OF RECORD?				YES, and I understand that this could effect the nature of my ownership interest. Provide details of any relatives.						
		TTING THE FOLLOWING EVIDENCE IN SUPPORT OF MY CLAIM OF . (use addition paper if necessary and attach all supporting								
PART IV.	EVIDENCE SUPPORTING C	LAIM	documentati	ion. Signature	es must be nota	arized.)				
		CLAIMA	NTS CERTIFICA	ATION AND SI	CNATURE					
I CEDTICY T	HAT THE ADOME INCORNATI					T NAV KNOVA	EDCE		Approved/Disapproved	
I CEKIIFY II	HAT THE ABOVE INFORMATI	IS AKE IKUE I	O THE REST OF	FIVIY KNOWL	EUGE.		Date			
SIGNATURE				DATE						