INTERMENT REQUEST FORM

The remains of ______________________________ are to be interred in Lot ________
in the ______________________________ Cemetery on __________ (Date)
at ______________________ (Time). Interment will preferable (if space allows) be in the grave
location indicated below: (Note: Time and date are subject to availability of cemetery personnel and
other scheduling factors).

<table>
<thead>
<tr>
<th>CREMATION LOT</th>
<th>FULL BURIAL LOT</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>B</td>
</tr>
</tbody>
</table>

Interment: ( ) Full Burial – Requires Vault - Notes: ________________________________

( ) Cremation Burial Notes: ________________________________

Other instruction: __________________________________________

______________________________________________________________

The undersigned warrants that either (check one):
( ) the undersigned holds interment rights to the lot (as recorded in the cemetery records), or
( ) the undersigned represents the holder of said interment rights or is otherwise authorized to order this
interment (explain and document)_________________________________________________

The undersigned agrees to hold harmless the Town of Hancock and its agents/employees in the
completion of this interment order.

__________________________________________ 
PRINT NAME

__________________________________________
SIGNATURE

__________________________________________
DATE

50 Main Street, P.O. Box 6
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Email: hwydept@hancocknh.org