

STOWE CEMETERY COMMISSION
P.O. BOX 730
67 MAIN STREET
STOWE, VT 05672

Phone (802) 253-6133
253-6143

Fax (802)

INTERMENT ORDER

The undersigned hereby requests and authorizes Stowe Cemeteries, subject to its rules and regulations, to inter on (BURIAL DATE) _____, 20____, at _____A.M./P.M.****(Winter Burial charges may apply)**

In Stowe's _____ Cemetery, in Section No. _____ Lot No. _____, which was originally purchased by _____.

(Please be sure to complete the next page with details of exact location within lot or group of lots.)

_____ Full casket burial _____ Cremated remains burial Veteran: ___yes ___no

Size of Urn/Vault _____

10' x 10' canopy available (\$100 rental fee): _____yes _____no (Payable to Stowe Cemeteries)

Contact info for day of burial (name & cell #) _____

****In the event of delay or change of plans, emergency contact for Stowe Cemeteries is 802-793-6811****

Name of deceased: _____, late of (address at time of death) _____, who died at (City/Town and State where death occurred) _____ on (date) _____.

I hereby certify that I am the (state relationship) _____ of the above-named decedent, and that this is your authority to make disposition of the remains of said decedent as indicated above. I hereby certify that I have the right to make this authorization, and I agree to hold Stowe Cemeteries, the Town of Stowe, and its officials and employees harmless from any liability on account of said authorization and interment.

Signed _____ Date _____

Print name _____ Phone number _____

Address _____

Funeral Director: _____

Address _____

Phone number _____

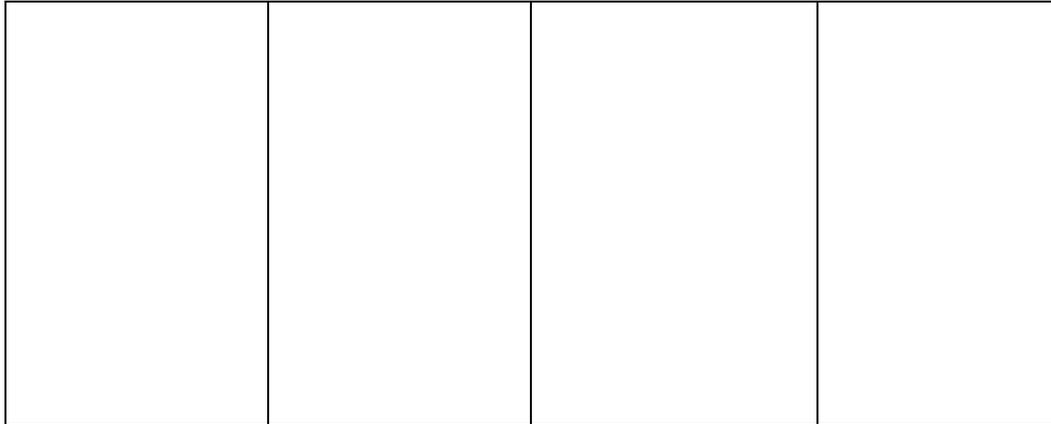
In the absence of any religious strictures, at least twenty-four hours notice is required before an interment will be made. **All fees must be submitted with this interment order.**

Received by Clerk's Office: _____ Received by Cemeteries Superintendent: _____

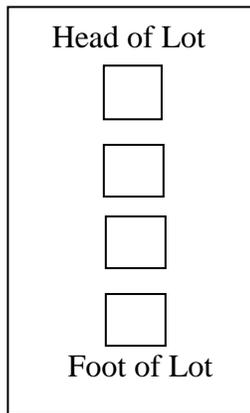
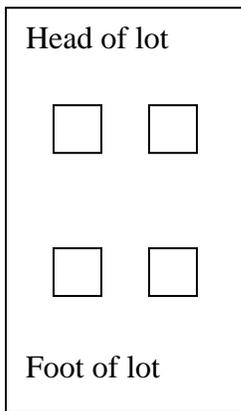
Fee Paid: _____

In order to assure that remains are interred where desired, please give directions concerning exact location. Please feel free to add any details such as markers, “next to”, “to the right (or left) of”, or “between” descriptions to make this as clear as possible. In some of the older sections of the cemeteries, the lots may not fit the diagrams below. You may modify these diagrams or draw your own diagram if needed or desired.

FULL BURIAL: If a group of lots is involved, please indicate exact location within the group.



CREMATED REMAINS: Up to four cremated remains may be interred in a single 4' X 12' lot. Please indicate on the diagram below: (1) which space within the lot you request for this interment, and (2) the dimensions of the urn vault or urn that will be placed. Bear in mind, a standard flush marker is 24” wide by 12” top to bottom.



MEMORIAL GARDEN LOT: Please indicate on the diagram below: (1) which space within the lot you request for this interment, and (2) the dimensions of the urn vault or urn that will be placed.

