Tuckerton Old Home Society	y Interment Form (NO F	uneral Home)	
			Todays Date
Full Name of Deceased			
Last	First	Middle	Maiden
	7		
DOB	DOD	Cause of Death	
	-	cause of Beath	5,111,5,11
Proposed Date of Interment	Proposed A	Arrival Time at Cemetery	Veteran Y/N
Funeral Services by Whom			
.,			
Funeral Home		Funeral Director	
	7	<u> </u>	
Phone Number	Fax Number	Email Address	
		2	
Location in Cemetery	-		
Casting II and Manual annua	Dia al /Ti a v	Lat Count (Nichol V	Purish as Courseins
Section # or Mausoleum	Block/Tier	Lot/Crypt/Niche #	Burial or Cremains
Names of any other Interments on	this lot/plot as of the date o	f this form, use other pages if	required.
	٦		
Copy of Deed Required, Copy Attac	hed -Y or N	No Deed Affidavit of Au	
		May require other informa	tion
Contact person: (Person in charge of	of making arrangements)	Phone # of Contac	t Person
Contact persons (resson in charge t	- making arrangements)	- Thome is or contact	
Address of contact person			
Hanna a sana a ta ahanna ta aalaha d			t Dawn
How person in charge is related		Email Address of Contac	
If necessary, if an existing mo	•		
Mim. of 96 Hrs. notice is req	•		
Notice time begins when this		•	
All areas must be completed	•	·	
A sketch showing the approx			s interred must be
submitted by family with all	•	•	
No interment without proof	• • • • • • • • • • • • • • • • • • • •	- ·	•
Burial of Cremains are requir			
Temp Metal Grave Marker is	•	•	
All Fees to be paid to TOHS p		·	ceed.
All businesses: Insurance Cer	•		
Meeting at cemetery require	d on all existing graves t	to confirm location of pro	pposed burial.
Payment:			
Opening Fee	Saturday Frost	New Purchase	Footing Total
			01.01.2022