



# HILLCREST CEMETERY

## Monument Application Form



<b>Supplier Name</b> _____	
<b>Address</b> _____ _____ _____	<b>Bill To: Same</b> (Yes or No) _____ If no - _____ _____

<b>Installer</b> _____	<b>Tentative Installation Date</b> _____
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### Supplier's Confirmation of Monument Sides


Monument Names:	Surname _____	
	Given Names _____	
	Left _____	Right _____

### Monument (please mark the appropriate boxes with an 'x')


Type:	<input type="checkbox"/> Flat	<input type="checkbox"/> Pillow	<input type="checkbox"/> Upright	
Material:	<input type="checkbox"/> Granite	<input type="checkbox"/> Marble	<input type="checkbox"/> Bronze	Other _____
Base Material:	<input type="checkbox"/> Granite	<input type="checkbox"/> Concrete		
Foundation (must be concrete):		<input type="checkbox"/> Runner	<input type="checkbox"/> Individual	

### Sizes

<b>Monument</b>	Length _____	
Back Height _____		Front Height _____
Width _____		

<b>Base</b>	Length _____	
Back Height _____		Front Height _____
Width _____		

### Individual Foundation

(must extend 4" on all sides)	Length _____	
Depth _____		Front Height _____
Width _____		

### Hillcrest Cemetery Use Only

<b>Names</b> _____	<b>Location</b> _____
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**Monument Permit Fee is:** \$70.00 + GST

Approved	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Reason not approved \_\_\_\_\_

Hillcrest Cemetery Administration

Date