

The Catholic Cemetery Association of the Archdiocese of Boston, Inc.

100 Cummings Center Suite 422G Beverly, MA 01915 Phone: 781-322-6300 Fax: 1.978.927.3087

MEMORIAL PERMIT APPLICATION FORM

CHECK ONE: Inscr	ription	☐ Foundation <i>YARL</i>	O USE:		
DDRESS:		Y			
EMETERY:	CITY	/TOWN			
OT OWNER:					
		Path/Row/Range		Lot/Grave	
	Sketch of Size & Description of Syml	pared by the Monument Memorial Showing all Dir bols, Photo Medallions, & Attach Drawing to Applica	mensions; Inscription on all Surface	s.	
	K WidthX Height ONT	Die Size Length		X Height	
scription work described at the top of the cordance with the rules and regulations. The Catholic Cemetery Association of clusive holder or holders of the right of conument, marker, or inscription work or olde property of the purchasing agonument. The purchasing agent CONUMENT COMPANY AGRES scription work as outlined at the top of	is application. Permission is also reques of The Catholic Cemetery Association of the Archdiocese of Boston, Inc. now in burial in the grave or lot described at the nthe grave or lot, and does or do hereby tent. The Catholic Cemetery of the is advised to obtain insurance comments. I certify that I have been at this agreement. I certify that this monum	sted for the Monument Compa- of the Archdiocese of Boston, force or hereafter adopted. The te top of this agreement and he agree to all the terms, conditi- te Archdiocese of Boston, verage for vandalism, the authorized by the person makin then tor marker is made entirely	ny to furnish the monument of lnc. It is understood that all significant in the exigners of this application repreby authorize and request the ones and other provisions set of lnc. is not responsible feft, or damage to this more good this application to prepare a profirst-grade material and the	nonument or marker, or to perform certain or marker, or perform the inscription work in uch work is subject to all the rules and regulation expresent that he, she, or they, is or are the sole and ecemetery to permit the placement of the orth on this application. This monument is the or vandalism, theft, or damage to this nonument. In monument, or marker, or perform certain has the workmanship on said monument or marker of Boston, Inc. now in force or hereafter adopted	
d further agree that if the completed mometery, without cost to The Catholic Commetery Association of the Archdiocese arker in the cemetery. I hereby agree to claims, demands or alleged causes of a sociation of the Archdiocese of Boston marker application by The Catholic Cervice. All monument, marker, or inscriptonument, marker, or inscriptonument, marker, or inscripton.	onument or marker does not comply with emetery Association of the Archdiocese of Boston, Inc., and its Agents, free fro indemnify, defend, and save harmless Taction arising by reason of the placement, Inc. property or other monuments or metery Association of the Archdiocese otton applications must be submitted for	h said rules and regulations, it of Boston, Inc. or to the Lot F m any liability whatsoever for the Catholic Cemetery Associate or inscription of said monum markers, during the transportation Boston, Inc. is evidenced by approval prior to any work be ust be approved prior to	will be removed by me within folder. The Monument Comparation of the Archdiocese of Bo ent or marker. I hereby agree on and or installation of this row the cemetery employee signing started so that there is no delivery. The monument	In three business days of notification by the any or Agent further agrees to hold The Catholic marker before the setting of said monument or soton, Inc. and its Agents, upon, or from, any an to pay for any damage to The Catholic Cemeter monument or marker. Acceptance of this monumature below issued for the monument or marker question concerning the acceptance of such t/marker is subject to inspection by The DRETURN. THANK YOU.	
gnature to be signed by own	er or legal representative(s)		Date	Phone Number	
int Name	Relationship to Owner		Address	Office Use Only: Owner ID #	
emorial Dealer	Signed by		Date	Check # / Amount	
			Date		
CA Employee	Signed when permit Issued		Date		