

APPLICATION

☐ Approved☐ Not Approved

Trustee _____

Pleasant Hill Cemetery Association

Mailing Address: 14710 FM 3090 • Anderson, Texas

77830

APPLICATION FOR INTERMENT

DATE _____

Name of Applicant _____ Relationship to Decedent _____

Address of Applicant _____

City _____ State _____ Zip _____

Phone _____ Phone _____ Email _____

Additional Contact _____ Relationship to Decedent _____

(Two contacts are required)

Address _____

City _____ State _____ Zip _____

Phone _____ Phone _____ Email _____

Name of Decedent _____ DOB _____ DOD _____

Address of Decedent _____

City _____ State _____ Zip _____

☐ Legacy Family☐ Member Carlos Fellowship☐ Long Standing Member of Carlos Community

Legacy Family Name(s) _____

No. of years in Community _____ (Please attach Property Deed) City/State of Birth _____

Mortuary _____ Date of Interment _____

Funeral Director _____ Phone _____

Address _____

City _____ State _____ Zip _____

ACKNOWLEDGEMENT OF RESPONSIBILITIES OF FAMILY

1. I understand and acknowledge that Pleasant Hill Cemetery is run strictly on the donations of the family members of those interred therein. All board members are volunteers. I agree to make ongoing donations to the Association for upkeep and administrative fees. (Your financial support is necessary and greatly appreciated.)

2. All wreaths, flowers and decorations must be removed from the property one week after the funeral.

3. I acknowledge that I am responsible for the removal/replacement of flowers, etc., when they become unsightly.

4. I understand that graves must be marked appropriately at all times and **a permanent gravestone must be placed within one year**. If the Association has to purchase an appropriate headstone after two years, I agree to pay all charges incurred.

5. I understand that The Pleasant Hill Cemetery Association is not responsible for opening or closing the grave site.

X _____ X _____

This application has been APPROVED. Submit a copy of this authorized form to your Funeral Director.

Pleasant Hill Cemetery, Carlos, TX

Plot # _____ Date _____ Trustee X _____ Phone _____

RECEIPT FOR FEES COLLECTED

Received by X _____ Check # _____ Please retain this copy for your records.

Received of _____, the sum of \$ _____ for maintenance and administrative purposes. Fees are due at time of plot selection. Please make check payable to Pleasant Hill Cemetery Association

