

MEMORIALIZATION PERMIT – APPLICATION FORM

Parks and Recreation Services / Brandon Municipal Cemetery

Ph: 204-729-2150 Email: cemetery@brandon.ca Web: brandon.ca/home-property-environment/cemetery/

***Renderings must be submitted to cemetery@brandon.ca along with permit application.

PART I – MUST BE COMPLETED BY APPLICANT											
	Memorial placed on sections with ribbon (PERMIT ONLY REQUIRED)				nstall flat marker only						
	Upright memorial re-lettering and/or re-furbish On-Site Off Site (PERMIT ONLY REQUIRED)			Install flat marker with attached vase							
	Flat marker re-lettering and/or re-furbish on site (PERMIT ONLY REQUIRED)			Install vase only							
	Adding vase and/or sub-base to existing monument (PERMIT ONLY REQUIRED)			Military Monument Install							
	Install individual foundation for memorial installation (PERMIT ONLY REQUIRED)			Concrete Base Requested							
Flat marker exchange or removal for additional engraving (FLAT MARKER EXCHANGE OR REMOVAL FEE)											
Memorial Dealer is permitted to install/remove memorials on foundation(s) only. Complete A, B & C for UPRIGHT Monuments. Complete D & E for FLAT MARKER. Complete E only if bronze plaque is being placed on a granite flat marker.											
	A. Dimensions of Monument (inc	hes)	Width: (SIDE TO	SIDE)	Depth: (FRONT TO BACK)	Heigh	nt: TO BOTTOM)				
	B. Dimensions of Base (inches)		Width: (SIDE TO SIDE)		Depth: (FRONT TO BACK)	Height: (TOP TO BOTTOM)					
	C. Dimensions of Sub-Base (inches)		Width:		Depth:	Height:					
	(CANNOT EXCEED MAXIMUM D. Dimensions of Flat Marker	Width:	(SIDE TO	Dept	(FRONT TO BACK)	' i	P TO BOTTOM)				
	(inches)	(SIDE TO	•		n. FACE TO UNDERSIDE	Height:) (FACE TOP TO BOTTOM)					
	E. Dimensions of Bronze plaque (inches)	Width:	,	Depth:		,				
(CANNOT EXCEED MAXIMUM HEIGHT) (SIDE T				O SIDE) (FACE TOP TO BOTTOM)							
PART II											
Memorial Dealer Name:											
Phone:					Email:						

Purchaser/Authorizer: *** Must be owner of lot executor admin of an estate POA to original owner:												
Name:												
Address:												
Phone:		Email:	Email:									
Legal Documents (Will/Notarized Let Estate) Attached:	ter/POA/Admin of	Yes	No	Photo ID Viewed								
I hereby authorize placement of the memorial as per PART III Signature(s):												
DART III												
PART III												
Deceased Name:	Date of Burial:											
Section:	Block:		Lot:									
PART IV												
Invoice Memorial Dealer (must be approved account) Paying Cemetery Directly												
PART V – FOR OFFICE USE ONLY												
Application Received:	Cost:		Receipt Nu	ımber:								
Date for Install or Removal:		Foundation Size:										
Marker/Vase/Monument Received:		Name on Memorial:										

***Disclaimer: should the purchaser of the memorial be different from the owner/admin/executor/POA of the lot, a letter of consent from the owner/admin/executor/POA must be obtained and attached to the application permit. Where joint ownership is involved, the signatures of all joint owners MUST be secured on this application form. Please contact the Brandon Municipal Cemetery Office for more information.