

PERMIT TO INSTALL MEMORIAL MARKER

SECTION 1: APPLICANT INFORMATION

DATE:		PLOT NUMBER:	
APPLICANT NAME:			
ADDRESS:		CITY, PROVINCE:	POSTAL CODE:
RELATIONSHIP TO DECEASED:			PHONE:

Permission is hereby given to install a memorial marker on the above noted plot. The marker shall conform to the requirements of the Village of Lytton Cemetery Bylaw 610, 2009. Fees are to be paid at the time that the permit is issued.

SECTION 2: FEES PAID ARE AS FOLLOWED

MEMORIAL MARKER:	
PERPETUAL CARE FUND (for future care of the cemetery)	
OTHER:	TOTAL:

X

APPLICANT SIGNATURE

DATE

X

VILLAGE OF LYTTON CORPORATE OFFICER

DATE