



TOWN OF BLACKFALDS

CEMETERY MONUMENT APPLICATION & PERMIT

PLOT OWNER INFORMATION

SECTION	PLOT	LOT
NAME OF DECEASED		
NAME OF PLOT OWNER/EXECUTOR/PURCHASER		
ADDRESS	PHONE	
OWNER/EXECUTOR/PURCHASER SIGNATURE	DATE	
<p>By signing this application, the owner/executor is authorizing the installation of the monument/marker on the aforementioned plot is in accordance with the requirements of the Town of Blackfalds Cemetery Bylaw 1180/14 and its amendments.</p>		

COMPANY REQUESTING PERMIT

COMPANY NAME		
ADDRESS		
CITY	PROVINCE	POSTAL CODE
NAME OF COMPANY REPRESENTATIVE	PHONE NUMBER	



BLACKFALDS
ALBERTA

COMPANY REPRESENTATIVE SIGNATURE	DATE (YYYY/MM/DD)
DO YOU HAVE A VALID TOWN OF BLACKFALDS BUSINESS LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, please enclose License Fee	

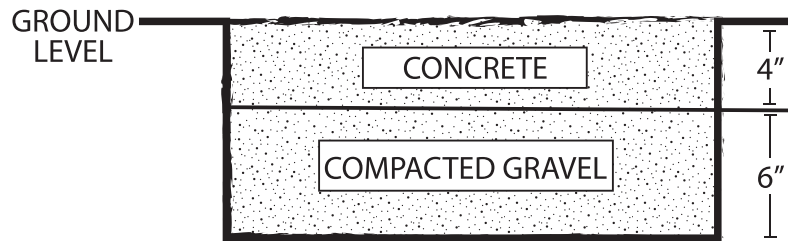
CERTIFICATION OF INSTALLATION

INSTALLER NAME	
ADDRESS	PHONE
INSTALLER SIGNATURE	DATE (YYYY/MM/DD)
By signing this application, the installer certifies that the installation of the monument/marker on the aforementioned plot is in accordance with the requirements of the Town of Blackfalds Cemetery Bylaw 1180/14 and its amendments.	

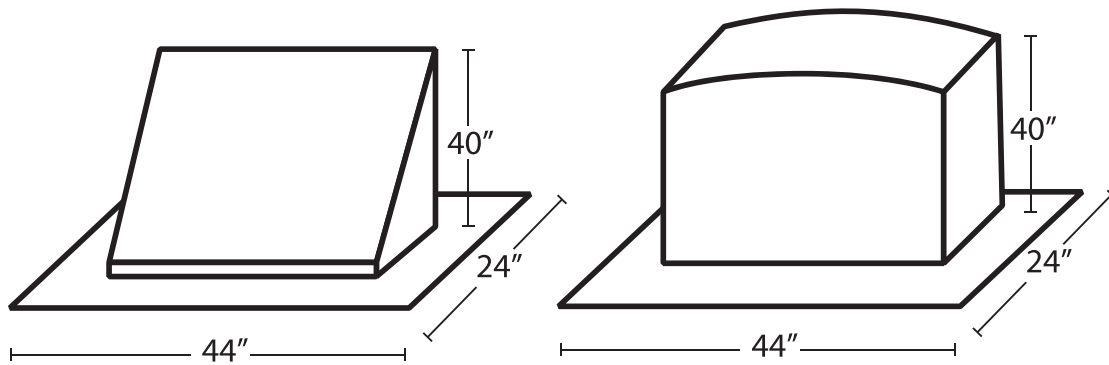
Please return this permit to the Town of Blackfalds following certification of installation.



Concrete Foundations Required for Mounting Upright Monuments and Flat Markers



Upright Monuments Specifications



Flat Marker Specifications

