

Village of Carmacks

P.O. Box 113 Carmacks, YT YOB 1C0

Cemetery Lot Reservation Form

Date:		
Name of Applicant:		
Address:		
Phone Number:		
Email:		
For Lot Number:		
Requested for:		
Relationship with the person:		
Description of Purchase & Headstone/Plaque In	nfro:	Amount:
	Total:	
Upon submission of this form and payment, the Once the time comes to use the lot, a burial per The use of the below mentioned lot in the Cem regulations lawfully in force in the said cemete	rmit must be presented to t netery is subject to all bylaws	he Village prior to interment. s, policies, rules, and
Signature of Owner:	Date:	
VOC representative:	Date:	