

**COLUMBIA TOWNSHIP CEMETERIES**

**GRAVE OPENING REQUEST**

**Sexton for Columbia Township, Dick Schiel**

**Phone No. (517) 592-2592**

**Fax No. (517) 592-8115**

Date of Request: \_\_\_\_\_ Requested by: \_\_\_\_\_

Phone No. \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Burial: \_\_\_\_\_ Time of Burial: \_\_\_\_\_

Cemetery: \_\_\_\_\_ Section: \_\_\_\_\_ Lot # \_\_\_\_\_ Plot # \_\_\_\_\_

Name of Deceased: \_\_\_\_\_ DOB: \_\_\_\_\_

Lot Owner: \_\_\_\_\_ Date of Death: \_\_\_\_\_

**\*Please furnish copy of deed or other evidence of interment rights.**

Check which is attached: Deed \_\_\_\_\_ Other \_\_\_\_\_

Type of Burial: Standard Grave \_\_\_\_\_ Cremation \_\_\_\_\_

Vault Company: \_\_\_\_\_

Funeral Home: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Funeral Home Address: \_\_\_\_\_

Funeral Home Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**A minimum of a 48-hour notice (submission of Grave Opening Request) is required for, scheduling Sexton to work and prepare the grave.**

**At the time of interment (burial), a copy of the cremation certificate or burial transmittal is required.**