

## City of Keystone Heights 555 South Lawrence Blvd

555 South Lawrence Blvd Keystone Heights, Florida 32656 352.473.4807 Off 352.473.5101 Fax



## **Cemetery Burial Permit**

	Date:			
□ Burial				
☐ Cremation				
This is authority for			to be buried in	
☐ Keystone Memorial				
•		Block Number		
□ 1 <sup>st</sup> Addition				
$\Box$ 2 <sup>nd</sup> Addition		Lot/Space:		
□ Old Cemetery				
Burial Name:		Date of B	irth:	
Date of Death:		Date Interred:		
First of Vin		Dalations	hin:	
	Relationship:			
Address:				
Telephone Number: (	_)		-	
Funeral Home:				
Address:			<u> </u>	
Telephone Number: (				
Fee: \$100.00 payable to the	City of Keystone	e Heights Cemetery		
Office Permit Processing:				
Date Received:	Check #	Amount:	By:	