**HILLSIDE CEMETERY FOUNDATION ORDER FORM**

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| **Name of Occupant(s) in Grave(s) - (Current or Future)**  |
| Name 1 |  |
| Name 2 |  |
| Name 3 |  |
| Name 4 |  |
| Name 5 |  |

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| **Location of Grave(s)** |
| Section |  |
| Lot # |  |
| Grave #(s) |  |

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| **Monument Base / Foundation Size** |
| Monument Base Size | Width (in inches) | Depth (in inches) |
|  |  |
| Foundation Size (See size requirements on next page)  | Width (in inches) | Depth (in inches) |
|  |  |
| Cost of Foundation 1. Multiply width by depth to determine total square inches.
2. Multiply total square inches by current cost per square inch.
 |  $ |
| **Type of Foundation** |
| Is this a new foundation, or a replacement of an existing foundation? (Circle one) | New | Replacement(proceed to question 2) |
| **2. If it is a replacement only**, would you like the City to discard the monument, or keep it for you to pick up? (Circle one) | Discard | Keep & Pick Up\* |

**\*Please Note: The City of Belleville is not responsible for damage to monuments that we remove at the customer’s request**

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| **Type of Monument** |
| Is this a flush (flat) marker? (Circle one)\*Reminder - cremains graves only accommodate flat/flush markers\* | No | Yes(proceed to question 2) |
| **2. If this is a flush (flat) marker only**, would you like it placed at the head or foot of the grave? (Circle one)  | Head | Foot |

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| **Contact for Order** |
| Name of person/company placing order: |  |
| Contact phone #  |  |
| Contact email address:  |  |
| Would you like to be contacted when the foundation is poured? (Circle one) | Yes | No |

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| **Foundation Size Requirements (Maximum Sizes)** |
| Full Grave - Single | Full Grave - Double (2 graves side-by-side) | Full Plot(5 graves side-by-side) | Cremains Grave(must be flat/flush) |
| **34” w x 12” d** | **68” w x 12” d** | **182” w x 12” d** | **24” w x 12” d** |

**This section completed by the City of Belleville only:**

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Date received: \_\_\_\_\_\_\_\_\_\_ Payment type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scheduled for pour (circle one): Spring Fall Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_