City of Belleville

6 Main Street ◇ Belleville, MI 48111-2788
734-697-9323 ◇ Fax 734-697-6837 ◇ www.belleville.mi.us

HILLSIDE CEMETERY FOUNDATION ORDER FORM

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

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

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

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

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:

Date received: _____   Payment type: _____

Scheduled for pour (circle one):   Spring   Fall   Year: _____