TOWN OF WOODRUFF

1418 1ST Avenue, Woodruff, WI 54568

Evergreen Municipal Cemetery 104 Elm Street Woodruff, WI 54568 Forest Garden Memorial Cemetery 9113 N. Townline Road Woodruff, WI 54568

CEMETERY MONUMENT PERMIT APPLICATION

Complete and route to Town at least 2 weeks prior to planned placement. Cemetery:			
hereby reques	ts a permit to erect a	monument/memo	orial for:
Decedent's Fu	ıll Name		
			Grave #
Note: Foundation	for monument must be min	imum of 2 feet x 3 fee	t, and not exceed grave plot.
Description/Si	ize of Monument:		
Date of Install	ation:		
Contact Name	»:	Phone #: _	
E-mail Addres	SS:		
Name of Lot (Owner or Legal Repro	esentative makin	g arrangements:
			
Permit Approv			
Date:	By:		
	•		n Clerk Signature