



## Town of Princeton

6 Town Hall Dr.

Princeton, MA 01541

Phone: 978-868-4126

### Authorization and Order for Interment

The undersigned hereby requests and authorizes the Town of Princeton subject to its rules and regulations to inter the remains of: \_\_\_\_\_

and who died on (date): \_\_\_\_\_ and is to be interred on (date): \_\_\_\_\_ and time \_\_\_\_\_

in Cemetery: \_\_\_\_\_ (Woodlawn, South, North, West, Parker II)

Section (applicable only to Woodlawn): \_\_\_\_\_ (Main, 1986, 1956)

Lot: \_\_\_\_\_ Space: \_\_\_\_\_

Burial Type: (Check One) Full \_\_\_\_\_ Cremation \_\_\_\_\_

Veteran: (Check One) Yes \_\_\_\_\_ No \_\_\_\_\_

I hereby certify that I am the Owner/legal representative of the above cemetery lot and authorize the Cemetery Department to make disposition of the remains of the deceased as indicated above. I hereby certify and represent that I have the legal right to make this authorization, and I hereby agree to indemnify and hold harmless the Town of Princeton, its agents and its employees from and against any and all liability, loss or damage they may sustain in connection with this interment authorization.

Signed (owner/legal representative): \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

Relation to original owner: \_\_\_\_\_

Funeral Director: \_\_\_\_\_

This completed form must be presented to the Town of Princeton Cemetery Superintendent prior to the opening of the grave.