Town of Gordonsville
Maplewood Cemetery
P. O. Box 276
Gordonsville, VA 22942
(540) 832-2233
www.townofgordonsville.org

Application for Burial Permit

To: Treasurer

The undersigned hereby makes application for a burial permit to allow the interment of

__________________________, age ______

Section ______ Lot ___________ Grave _________, in Maplewood Cemetery.

This lot is presently owned by ________________________________

Address of owner: _____________________________________________

Birth Date __________________________ Death ______________________

Date of Interment ____________________________

Casket Burial: ___________________________ Ceremonial Burial: _____________

Applicant:_______________________________ Date: ______________________

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Head

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Foot

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Office Use Only:

Fee: $100 Payment Method: __________ # ___________ Date: __________

NOTES/Comments: _________________________________________________________

__________________________________________________________

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