

Authorization to Perform Work or Erect Monument
HOLY CROSS CATHOLIC CEMETERY
East Bernard, Texas

Person/Company to Perform Work or Erect Monument _____

Contact Person for Company _____ phone # _____

Description of Work to be Performed _____

Beginning Date of Job _____ Projected Completion Date _____
(Job should be completed in timely manner, barring unforeseen complications, i.e. – weather)

Name of Family Plot Monument/Work will be performed on _____

Signature of Burial Right Holder or Heir _____

I certify as the Person/Company performing work and/or erecting monument that I will assume liability for damages to said grounds of this cemetery while performing work.

Signature _____ Date _____

Draw a sketch of work/monument to be done: *(monuments must have no verse, inscription or illustration that is inconsistent with the teachings of the Roman Catholic Church)*

Approved by Cemetery Administrator _____

Date _____ Work Site Measured _____ yes _____ no

(This form may be reproduced)