



CITY OF HENDERSONVILLE
PUBLIC WORKS DEPARTMENT
305 WILLIAMS STREET
HENDERSONVILLE, NC 28792
(828) 697-3084

OAKDALE CEMETERY INTERMENT APPLICATION

LICENSE # _____, BLOCK _____, SECTION _____, LOT _____
Or
MAUSOLEUM (Number 1-84) _____

The undersigned, _____, does hereby
authorize the above designated burial space to be used for the interment and burial of

The undersigned declares that the undersigned's relationship to the grantee in the License for the burial
space is _____

The undersigned declares that the undersigned's relationship to the deceased is

The undersigned further declares that the undersigned has the authority to authorize interment of the
above named person in the above designated burial space.

The undersigned will be responsible for all costs associated with interment and burial.

The undersigned for and on behalf of the undersigned and the undersigned's personal representatives,
agents, successors, heirs, and assigns agrees to release, hold harmless and indemnify the City of
Hendersonville, its officers, employees, agents and contractors from any and all claims, damages or liability of
any kind including but not limited to attorney's fees and costs that may exist or might ever exist in the future
as a result of the directions provided herein for the interment of the above named person in the above
designated burial space.

The undersigned certifies and declares that the undersigned has not sold, promised to convey or
otherwise agreed to dispose of the above-described burial space.

This the _____ day of _____, 20____.

Date of Death: _____

Date and Time of Burial: _____

Type of Burial (Traditional or Urn): _____

Funeral Home in Charge of Arrangements: _____

Contact Person: _____

Telephone Number: _____

Signature of person authorizing use of burial space

Printed name of person authorizing use of burial space

Address of person authorizing use of burial space

Telephone Number

Sworn to and subscribed before me this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____

Staff Signature: _____

Printed Name: _____

Date: _____

NORTH CAROLINA
HENDERSON COUNTY