

WILKIE & DISTRICT CEMETERY COMMITTEE

PERMIT TO COMPLETE WORK

Name: _____

Date: _____

Tel Number: _____

Address: _____

Name of Interned Person: _____

Division: _____ Block: _____

Plot: _____

Description of proposed work: (Must include dimensions)

I hereby agree to comply with the Rules and Regulations of the Wilkie and District Cemetery Committee:

Applicant

APPROVAL

Permission is hereby granted to _____
to complete the proposed work as described above.

Wilkie and District Cemetery Committee Date