SWANCREEK TOWNSHIP

5565 CO. RD. D

DELTA, OH 43515

Phone/Fax: 419-822-4371

**BURIAL NOTICE**

DECEASED NAME: RESIDENT: YES \_\_\_\_\_\_ NO\_\_\_\_\_\_\_\_

DECEASED ADDRESS:

(If a Swancreek Township Resident the Address is required)

CEMETERY SEC: LOT: GRAVE:

LOT OWNER: DEED:

TYPE OF BURIAL **- PLEASE CIRCLE THE CORRECT BURIAL:**

|  |  |  |
| --- | --- | --- |
|  **Open & Closing Costs – Regular Interment** | **RESIDENT** | **NON-RESIDENT** |
|  Weekdays before 2 P.M.  | **$475.00** | **$600.00** |
|  Weekdays after 2 P.M.  | **$575.00** | **$700.00** |
|  Saturday before 2 P.M.  | **$575.00** | **$825.00** |
|  Saturday after 2 P.M.  | **$675.00** | **$875.00** |
|  Holiday or Sunday  | **$750.00** | **$875.00** |
|  |  |  |
|  **Open & Closing – Half Size / Cremations** |  |  |
|  Weekdays before 2 P.M. | **$275.00** | **$400.00** |
|  Weekdays after 2 P.M. | **$325.00** | **$450.00** |
|  Weekends/Holidays/Overtime | **$325.00** | **$700.00** |
|  Columbarium Burials | **$50.00** | **$100.00** |
|  |  |  |
|  Exhumation | **Fees Doubled** | **Fees Doubled** |
|  |  |  |
|  Two side by side openings same time | **$575.00** | **$1000.00** |
|  |  |  |

DAY: DATE: TIME:

FUNERAL HOME: REPRESENTATIVE:

PHONE: FAX: EMAIL:

**For office use:** Paid: \_\_\_\_ Check #: \_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ Transit Slip Permit #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cemetery Book #: \_\_\_\_\_ Deed Book: \_\_\_\_\_\_\_\_\_Excel Data Entry: \_\_\_\_\_ Comments:

**\*\*\*Information must be filled in and faxed to Swancreek Township 419-822-4371\*\*\***