

TOWN OF GOLDEN

Application for Cemetery (Reservation and/or Interment)

| Full Legal Name: | | | De | eceased_ | Reservati | ion |
|--|------------------|--|--------------------|---------------|----------------------------------|--------------------|
| Maiden name / previous last name(s) (i | f applicable): | | | | | |
| Physical Address: | | | | | | |
| Date of Death: | Birth Date: | | | _ Age a | t Death: | |
| Place of Death: | | _ Place of Birth: | | | | |
| Physician or Coroner: | | | | | | |
| Funeral Home: | | Name of FH Cor | ntact: | | | |
| GRAVE - Section: Block | k: Lot:_ | Other info |): | | | |
| Date of Interment: | Date of Memorial | I Service: | | _ Service | e Time: | |
| Place of Service: | | | | | | |
| RESERVE - Section: Blo | ock: Lo | ot: Other i | nfo: | | | - |
| Full Legal Name: | | Relatio | nship to de | eceased: | | |
| CHARGES: | T | ype of Interment: | | | | |
| Grave Space@ | \$ | | | | | |
| Care Fund@ | \$ | Description Plot/Grave Space* | Full Burial 200 | Infant 100 | Cremation 200 | Columbariun 500 |
| Cap. Impr. Fund@ | \$ | Small Cremation* | - | - | 90 | 450 |
| | | Cemetery Care Fund* Capital Impr. Fund* | 150 150 | 100 100 | 150 150 | 150 |
| Open & Close | \$ | Small Cem Care Fund* | | - | 90 | 150 |
| Grave Liner | \$ | Small Cap. Impr Fund* Open & Close* | - 400 | - 250 | 90 100 | 100 |
| Engraving | \$ | Grave Liner* | 250 | 250 250 | 70 | 100 |
| Extra Services/Overtime (List all below) | \$ | | _ | | | |
| Sub-Total: | ¢ | Extra Services (weekend/holiday) | See schedule A | | See schedule A |) |
| GST | Φ | *Reg Residential rates For non-residents see | | | o Not Include ate info see So | - |
| | Φ | schedule A | | | en/Close canno | |
| TOTAL ACCOUNT: | \$ | | | | | |
| Dated at,, | thisday | y of | , 20 | · | | |
| - Control Control | | TOO 0: " 0: | | | | |
| Purchasers Signature PURCHASER AND/OR NEXT OF KIN IN | | TOG Staff Signa | | • | | |
| Name: | - | _ Relation to Decease | ed: | | | |
| Mailing Address: | | | | | | |
| Phone Number: | | | | | | |

For more Next of Kin, please list information on backside or separate piece of paper. This information is very important for future burials in same lot. Please refer to Cemetery Management Bylaw 1276, 2011 available on the Town of Golden Website for further information.

SCHEDULE 'A'

SCHEDULE OF FEES

1. CEMETERY LOT

1.1 For Residents and Property Owners

| | Licenses to Use Niche/Plot | Cemetery Care Fund | Cemetery Capital Reserve Fund | |
|--|-------------------------------|-----------------------|----------------------------------|--|
| Full size for Adult/ Child or Cremated remains | \$ 200.00 | \$ 150.00 | \$ 150.00 | |
| New - Small size Cremated | \$ 90.00 | \$ 90.00 | \$ 90.00 | |
| Remains only section Infant | \$ 100.00 | \$ 100.00 | \$ 100.00 | |
| Standard Niche | \$ 500.00 | \$ 150.00 | \$ 150.00 | |
| | | | | |
| 1.2. For Non-Residents | License to Use Niche/Plot | Cemetery Care Fund | Cemetery Capital Reserve Fund | |
| Full size for Adult/ Child Or Cremated Remains | \$300.00 | \$225.00 | \$225.00 | |
| New – Small size for Cremated remains only Section | \$ 135.00 | \$ 135.00 | \$ 135.00 | |
| Infant | \$ 150.00 | \$ 150.00 | \$ 150.00 | |
| Standard Niche | \$ 700.00 | \$ 300.00 | \$ 300.00 | |
| 2. SERVICES | | | | |
| 2.1 Interment | | | * | |
| Adult / Child | \$ 400.00 | | | |
| Cremation | \$ 100.00 | | | |
| Infant | \$ 250.00 | | | |
| Standard Niche | \$ 100.00 | | | |

2.2 Exhumation of a Grave

| Adult/ Child | \$ 505.00 |
|----------------|-----------|
| Cremation | \$ 150.00 |
| Infant | \$ 300.00 |
| Standard Niche | \$ 100.00 |

2.3 Additional Winter fees (Nov 30th - Mar 31st)

| Adult/Child (full burial) | \$ 150.00 |
|---------------------------|-----------|
| Cremation | \$ 100.00 |
| Infant (full burial) | \$ 150.00 |
| Standard Niche | \$ 100.00 |

| 3. SERVICES AND CHARGES (IN ADDITION TO SECTION 1 AND 2 ABOVE) | | | |
|---|-----------------------------|--|--|
| 3.1 Burials after 2:00 p.m. Monday to Friday excluding statutory holidays | \$ 150.00 | | |
| 3.2 Cremation/ Niche Interment after 2:00 p.m. Monday to Friday other than a Holiday | \$ 100.00 | | |
| 3.3 Burials on Saturday, Sunday and Holidays | \$ 250.00 | | |
| 3.4 Cremation/ Niche Interments on Saturday, Sunday or Statutory Holidays | \$ 200.00 | | |
| 3.5 Plot Reservations a) One (1) time administration fee b) Annual fee (5 year prepayment required)- per year | \$ 50.00 \$ 10.00 | | |
| 3.6 Transfer of Licensea) Carefund Contributionsb) Administrative Transfer cost | See section 1.1 \$ 50.00 | | |
| 3.7 Charge for use of non standard (not supplied by Town of Golden) Grave Liners | \$ 50.00/hr | | |
| 3.8 Late Arrival Charges | | | |

4. INSTALLATION OF MEMORIALS

| | | Fee | Care Fund Contribution |
|----|-------------------------|----------|------------------------|
| a) | Single Cremation | \$ 35.00 | \$ 35.00 |
| b) | Double Cremation | \$ 45.00 | \$ 45.00 |
| c) | Single Family Cremation | \$ 45.00 | \$ 45.00 |
| d) | Double Family Cremation | \$ 52.50 | \$ 52.50 |
| e) | Single Plot | \$ 52.50 | \$ 52.50 |
| f) | Double Plot | \$ 70.00 | \$ 70.00 |
| g) | Upright Markers | \$ 87.50 | \$ 87.50 |

5. GRAVE LINERS

| a) | Standard Size | \$ 250.00 |
|----|----------------|-----------|
| b) | Cremation Size | \$ 70.00 |

c) Infant Size to be supplied by Licensee