

72-02 Astoria Blvd. East Elmhurst, NY 11370

| I/We, the undersign   | ed, residing at addre                         | ess:  |   |   |
|---|---|---|---|---|
| City  | , State                                       | , Zip Code  | in the County of  |   |
| Being duly sworn, d interment rights in:                              | epose and say that I/                         | we are the owner  | r(s) of, or the next of kin responsible for the   |   |
| Grave   | Range_  |   | Plot  |   |
| Lot or Grave  | Row   |   | Section   |   |
| Crypt#  | Level_  |   | Building  |   |
| Niche#  | Column  |   | Building  |   |
| Within St. Michael's  | Cemetery; Block 10                            | 16 Lot #'s 1, 310, 4  | 450, and 550.   |   |
| My/Our relationship   | to the deceased is:                           |   |   |   |
| receipt, privilege, gr<br>license receipt of th<br>destroyed and that | rave, deed or lot. I/w<br>e grave or the deed | ve know of my/ou<br>of the lot, crypt, o<br>y someone else, a | nts in or so to, or claim against said license, or own personal knowledge that the original or niche has been misplaced, lost, stolen or and I/we am/are legally entitled to the sole |   |
| officers, managers a arising from the ma                              | and employees harm<br>king of interments in   | less against and to<br>or disinterment's                      | emetery, St. Michael's Church and it's owner or assume payment of all damages and claim is from said lot, grave, crypt, or niche and/or above lot, grave, crypt, or niche.            | S |
| Print Name:   |   | Date:   | ······································  |   |
| Signature:  |   |   |   |   |
| Sworn to me this  |   | day of  | 20  |   |
| Notary seal:  |   |   |   |   |