



City of Pembroke

Northside Cemetery Work Permit



Name and address of firm performing work:

Point of contact and phone number:

Nature of work being performed:

Date work is to be performed:

Estimated time in:

Time out:

Owner of cemetery lot and/or name of person authorized to request burial arrangement:

Phone number of owner or authorized person:

Exact location of lot (Section, Block, and Lot No.):

(example: NW Section; Block A, Lot 1)

Name and age of deceased:

Signature:

(Authorized employee of firm performing work)

Date:

Print Name:

For Office Use Only

Received by:

Date:

Work Order Number:
