

COST:

Town of Three Hills PO Box 610 Three Hills, Alberta TOM 2A0

Phone: (403) 443-5822
Fax: (403) 443-2616
Website: www.threehills.ca

DATE: FUNERAL HOME: REQUEST FOR GRAVE **OPENING** NAME: DATE OF INTERMENT: TIME OF SERVICE: _____TIME OF INTERMENT:_____ PLOT (Confirmed with Family Deed): DOUBLE DEPTH: 1ST BURIAL DATE: _____ NAME:____ 2ND BURIAL DATE: NAME: SPOUSES NAME: DESCRIPTION: Concrete: _____ Size of Urn: _____ INVOICE TO: ADDRESS: TOWN: _____ POSTAL CODE: ____ CONTACT NAME: CONTACT PHONE NUMBER: SIGNATURE: PLEASE FAX THE COMPLETED FORM TO: 403-443-2616 For Office Use Only:

Grave Plot:

Grave Fees (plus GST):_____