



HIGHLAND CITY

Highland City Cemetery Burial Application

Burial Number: _____

Type of Burial: _____

Deceased Information

Full Name _____ Age _____

Birth Date _____ Place of Birth _____

Death Date _____ Place of Death _____

Veteran _____ (Y/N) Branch _____ War _____

Cause of Death _____ Gender _____ (M/F)

Spouse's Name _____ Living _____ (Y/N)

Father's Name _____

Mother's Name _____

Funeral Information

Mortuary _____ Phone Number _____

Vault Co. _____ Phone Number _____

Type of Vault _____

Funeral Location _____

Fees & Payment Information

Opening/Closing _____

Temporary Marker _____

Total _____

Applicant Information

Name _____ Phone Number _____

Address _____

Signature _____ Date _____

For Office Use Only

Date of Burial _____

Time _____

Location **Section** _____ **Block** _____

Grave _____

Sexton _____ Trever Aston _____

Cert No. _____

City Recorder _____ Stephannie Cottle _____

☐ Scan

☐ Application

☐ Obituary

☐ Folder

☐ Receipt

☐ Cemetery Plots - WORD

☐ Map

☐ IWORQ

☐ Spatial Generations