



CITY OF HENDERSONVILLE
 PUBLIC WORKS DEPARTMENT
 305 WILLIAMS STREET
 HENDERSONVILLE, NC 28792
 (828) 697-3084

OAKDALE CEMETERY LICENSE APPLICATION

*Please read the Chapter 18 of the Code of Ordinances for the City of Hendersonville and the Rules and Regulations Governing Oakdale Cemetery **before** completing this application.*

License will not be issued until: (1) This Application is completed and returned to the Public Works Department, (2) this Application is approved by the City, and (3) payment of the purchase price is received by the City in full.

Please print or type

Name: _____
 First Middle Last

Address: _____

Mailing Address: _____
 (if different) _____

Phone: (_____) - _____

Email: _____

Number of Graves (max 8): _____

Names of all Person(s) in Responsible Charge (Person to whom an interment permit may be issued, see City Code):

 First Middle Last Relation
 Block _____, Section _____, Lot _____ Or Mausoleum (Number 1 – 84) _____

 First Middle Last Relation
 Block _____, Section _____, Lot _____ Or Mausoleum (Number 1 – 84) _____

First Middle Last Relation
Block _____, Section _____, Lot _____ Or Mausoleum (Number 1 – 84) _____

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Block _____, Section _____, Lot _____ Or Mausoleum (Number 1 – 84) _____

First Middle Last Relation
Block _____, Section _____, Lot _____ Or Mausoleum (Number 1 – 84) _____

By my signature below, I confirm that I have read and understand Section 18 of the Code of Ordinances of the City of Hendersonville, and the Rules and Regulations Governing Oakdale Cemetery, and agree to fully comply. Furthermore, I understand that family and those responsible for funeral/burial arrangements are also bound to comply with the Rules and Regulations. I verify that all the information listed on this Application is true to the best of my knowledge.

Signature of applicant

Date

Printed name of applicant

This section to be completed by City Staff:

License # _____

Staff Signature _____ **Date** _____