


CATHOLIC CEMETERIES, INC. Diocese of Wilmington 
Application to Install Memorial, Monument ,Vase Assembly

To: _____ Cemetery Name of person(s) on memorial _____

Application is hereby made to permit the installation of a memorial with a request that you construct a memorial foundation on the following location:

SECTION _____ Block _____ Lot _____ Grave(s) _____

The selling agent (if any) is required to have an agency agreement with the monument dealer and a thorough knowledge of all regulations related to monument restrictions and requirements. The agent signing this agreement acts as the representative for the monument dealer that will manufacture the memorial in full accordance with the rules and regulations of the cemetery. THIS MEMORIAL MAY NOT CONTAIN ANY EMBLEM, INSIGNIA OR INSCRIPTION THAT IS INCONSISTENT WITH ROMAN CATHOLIC DOCTRINE AND OVERALL GOOD TASTE. Should any memorial become defective or unsightly, the cemetery reserves the right to remove such memorial and charge the certificate holder/heirs for said removal. The undersigned represents that he/she is the appropriate certificate holder/heir to authorize memorial placement on the lot and requests that the above referenced cemetery install the required foundation and agrees to the terms and conditions set forth herein. The selling agent or monument dealer will not release the memorial for manufacture until after specific verbal approval is given by cemetery management.

 Name of purchaser if original lot owner (print) Address (print) phone no.

 SIGNATURE DATE EMAIL

 Name of purchaser if next of kin (print) Address (print)

 SIGNATURE DATE EMAIL

 Selling agent company (print) Selling agent representative (print) Signature

MONUMENT DEALER CERTIFICATION

I CERTIFY THAT I AM A LICENSED MEMORIAL DEALER WITH APPROPRIATE LIABILITY AND WORKERS' COMPENSATION INSURANCE COVERAGE. I further certify that this memorial is manufactured from first grade material and guaranteed by me to be free from all flaws, defects, and tool marks and that the workmanship is of the highest quality. Should a defect in material or workmanship become evident within five years after setting upon notification from the cemetery management I will replace the memorial at no charge to the purchaser or family. I agree to be familiar with all regulations and guidelines related to memorialization at the cemetery. I agree to arrange installation date and time with the cemetery office and agree to pay for any damage to cemetery property in the process of installing the memorial. Workers engaged in setting the memorial have the appropriate liability and workers' compensation insurance coverage. Cemetery reserves the right to correct any errors in placement or installation of the concrete memorial foundation. No memorial may be removed from the cemetery without written authorization.

 Dealer Company Name(print or type) Phone number and/or email (print or type)

Release of Liability

The undersigned purchaser acknowledges and understands that Catholic Cemeteries, Inc. cannot be held liable for scratches on bronze or granite memorials. Such damage is caused by environmental factors and/or routine cemetery maintenance operations such as edging and mowing. With bronze memorials there is a normal aging process that may result in darkening and a green patina over the years. The purchasers have been informed that all memorials placed in the cemetery remain as the personal property of the purchaser, assigns, and/or heirs. The cemetery is free from all liability because of vandalism and/or theft.

 Purchaser name (please print) Signature

Application Fee : \$60.00 Foundation Charge: \$.80 per square inch

Specifications

Approved: _____ **Date:** _____

Finishes are as follows: polished, sanded, sawn, rock pitched. Generally the front, back and sides of bases for all upright monuments must be rock pitched. It is recommended that the top and sides of dies be rock pitched as well. Emblems can be laser, sand blasted, or carved. A prominent religious symbol is required on the memorial.

TYPE OF MEMORIAL

Separate vase: Vase type _____ Base size _____ Base type & color _____

UPRIGHT/SLANT single companion COLOR _____

Base: length _____ width _____ height _____ 8" minimum

Finish: sides _____ top _____ other _____

Die: length _____ width _____ 8" minimum height _____

Finish: top _____ Front _____ Back _____ Sides _____

LAWN LEVEL: Granite Bronze single companion COLOR _____

length _____ width _____ thickness _____ Vase 4" min up to 24" by 12" 6" min larger

BRONZE SIZE: Length _____ Width _____ Base size: _____ Vase

finish sides: Rock pitched Sawn **BASE COLOR** _____

Draw design and lettering layout below. Draw to scale if possible. Show lettering to size and all emblems, epitaphs, etc. If needed attach an additional sheet. If providing panels that designate specific grave locations be sure they are correctly placed. Locations must be sandblasted in the lower right corner of lawn level memorials and the front right lower corner on the die for upright memorials.

OFFICE USE ONLY

Date Received: _____

AMOUNT\$ _____

Date Foundation Built: _____ Date Memorial Erected: _____ Reviewed by: _____