



APPLICATION FOR BURIAL RIGHT



Cemetery: 770 West 500 South
 City Office: 75 North 100 West, Midway City, Utah 84049
 Mailing Address: PO BOX 277, Midway City, Utah 84049
 Landline: (435) 654-3223 X 117

Certificate Holders Name:

(Last Name)	(First Name)	(Middle Name / Initial)	(Family Trust Name)	Residency Status: (MCPR/WCPR/NON PR)
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Spouse or Joint Certificate Holders Name:

(Last Name)	(First Name)	(Middle Name / Initial)	(Family Trust Name)	Residency Status: (MCPR/WCPR/NON PR)
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Primary Residence Address:

(Street)	(City)	(County)	(State)	(Zip code)
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Mailing Address:

(Street)	(City)	(County)	(State)	(Zip code)
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Phone Number / Email:

(Land Line)	(Cell Phone)	Email:
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Heir / Emergency Contact #1

(Last Name)	(First Name)	(Middle Name / Initial)	(Family Trust Name)	Residency Status: (MCPR/WCPR/NON PR)
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Spouse or Joint Certificate Holders Name:

(Last Name)	(First Name)	(Middle Name / Initial)	(Family Trust Name)	Residency Status: (MCPR/WCPR/NON PR)
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Primary Residence Address:

(Street)	(City)	(County)	(State)	(Zip code)
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Mailing Address:

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Phone Number / Email:

(Land Line)	(Cell Phone)	Email:
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