

Cemetery Plot Claim Form

(to be used when claimant is not named on certificate or original documents are lost)

Claimant claims ownership of the following-described Burial plot in the Midway City Cemetery.

This Claim is:	■ Not Disputed	□ Dis	puted	
	CLAIMAN	IT'S INFORMATION	ON	
Name of Claimant: Address:				
Telephone Number: Email Address:				
	ORIGINAL CERTI	FICATE OR DEE	D OWNER	
CERTIFICATE NUMBER	(YEAR-MONTH-DAY-PLOT I	NUMBER)		
Burial Plot Number: Plot Type: ☐Single	SECTION BLOCK e			
Name of Original Ov Address:				
Telephone Number: Email Address:				
Residency: 🛚 Midv	way 📮 Wasatch Cou	ınty 📮 Non-	-Resident	
Date Originally Purc	hased:	<u> </u>		
	EVIC	DENCE OF CLAII	M	
Claimant's Relations	ship to Original Owner:			_ (attach proof documents)
Other descendants of Name:	of same of higher degree a	as Claimant:	Relationship:	
	(attach additiona	al pages if necess	sary)	
Testamentary Docur	ments evidencing Claim: _			

BURIAL PLOT NUMBER _ Testamentary Documents Attached. I am the named: Personal Representative or Executor Trustee of the original Waivers and Consents from other potential Claimants Attached. Other: I hereby request that all old evidence or incidents of ownership, including deeds, documents or certificates, be revoked, and that a new Certificate of Burial Rights be issued to the following: REQUESTED NEW CERTIFICATE OWNERSHIP INFORMATION CERTIFICATE NUMBER: ___ (YEAR-MONTH-DAY-PLOT NUMBER) Burial Plot Number: Section ____ BLOCK ____ LOT ____ PLOT ____ Plot Type: ☐ Single ☐ Stacked ☐ Cremation Name of Owner: Address: Telephone Number: Email Address: Residency: Midway Wasatch County Non-Resident Successor In Interest #1 _____ Address: Telephone Number: ______ Email Address: Successor In Interest #2 Address: Telephone Number: _____ Email Address:

Claim Fees Paid in Full.

BURIAL PLOT NUMBER _

AFFIDAVIT

Му	/ name is				(pleas	e print).				
	m the Cla ot in the N			n the right to the Bui netery.	ial Rights Ce	ertificate rega	rding the abo	ove-described Buria		
		I hereby certify that I have authority under Utah law to claim this Burial Right in behalf of the estate of the original owner. I hereby certify that the above information is complete, accurate and true, to the best of my knowledge and belief. I acknowledge that signing this affidavit and changing the ownership of the Burial Rights Contificate on folco information or without actual outhority to do so may subject me to civil.								
		Certificate on false information or without actual authority to do so may subject me to civil and/or criminal penalties and the cancellation of any Burial Rights Certificate issued pursuan								
		to this Claim. I agree to indemnify and hold harmless Midway City, its employees, officers, agents or elected								
				any and all claims, la						
		but no	t limited	to court awards, co						
		this Cla		owing other Certifica	tes of Burial I	Rights issued	in my name	:		
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								-		
								-		
Dated t	this c	day of		, 20						
		, _								
					Claim	Claimant				
State o	of		}							
County	of		:ss _ }							
	Cubaari	bad and	d Cwarn	to before me by		on th	oio dove	of.		
20	Subscri	bed and	3 SWOIII	to before the by		, OH tr	iis day c	Л,		
				1	NOTARY					
	Claim	n is:		Accepted		Denied				
				•						
facc	cepted	:								
⊐	New Certificate No					ssued and	d Copy A	ttached.		
_	Transfer Fees Paid in Full.									
	Origi	ginal Evidence of Ownership Attached.								
						BY:				
						Midway C	ity Sexton			