



Canmore Cemetery Plot or Niche Purchase

Date of Application: Certificate of Easement#:								
Plot Owner Name:				Plo	t:			
Full Address:				Blo	ck:			
Date of Birth DD/MM/N	γ			Sec	ction:			
Phone Number:				Re	sidency Sta	atus:		
Email:				Sig	nature of C)wner:		
The person noted above has been granted the permission to erect the following monument under the terms and conditions of the Cemetery Bylaw currently in effect, and as per the design and specification submitted herewith:								
Plot Type:				*Please note that approved certificate of easements				
Internment Types:				must be renewed every 20 years				
Total Interments:								
Next of Kin								
Name:				Name:				
Relationship to Plot Owner:				Relationship to Plot Owner:				
Address:				Address:				
Email:	nail: Phone:			Email: Phone:				
Send Invoice Via: Email Mail								
Invoice Information Name:								
Mailing Address:								
Phone:			Email:					
Signature: Date:								
Office Use Only								
Ceritifcate of Easement APPROVED BY					0-0000-4230	Plot / N	liche Fee:	
Cemetery Coordinator		Date:		1-570-0000-4220			er of Plots/Niches:	
						Subtot	al:	
Signature:					5% GS	Γ:		
					TOTAL	:		