



Burial Authorization Form

Pursuant to the *Funeral, Burial and Cremation Services Act, 2002* and *Ontario Regulation 30/11 s.161(1)* and all amendments thereto, no cemetery operator shall be permitted to inter human remains in a lot, other than the remains of the Rights Holder(s), without the written consent of the Rights Holder(s).

Interment Rights Holder/Authorized Representative Name(s):

Address:

Email:

Phone:

Relationship to Interment Rights Holder(s) (ie. Self, Estate Executor, Child, Grandchild):

Cemetery:

I, _____, do hereby grant permission to the individual(s) listed below, that upon their death, they may be buried in the below mentioned plot(s) as space permits:

Full Legal Name	Date of Birth	Plot Description

I confirm that I am the Interment Rights Holder with the authority to authorize burials in the above-mentioned plot(s).

I have attached a copy of an Interment Rights Certificate issued by the Township and understand that these measures are security mechanisms for the protection of our consumers.

I have included proof of executorship (if acting on behalf of a deceased interment rights holder within 3 years of passing).

Township of Georgian Bluffs Cemetery Services | 177964 Grey Road 18, Owen Sound ON N4K 5N5
www.georgianbluffs.ca/cemeteries | P: 519-376-2729 ext. 921



Georgian Bluffs

DEEPLY ROOTED. SUSTAINABLY GROWING.

If you have lost your certificate, please contact the Township by email at cemeteryservices@georgianbluffs.ca or by calling 519-376-2729 ext. 921 for assistance. For security reasons, you will be required to confirm details about the plot to determine ownership. Fees apply.

Signature of Interment Rights Holder(s):

Date:

Date:

For Office Use Only

Approval Signature:

Date:

Cemetery Representative, Township of Georgian Bluffs

Notes (ie. other approvals obtained/required):