

PETITION FOR REMOVAL OF REMAINS

Name of deceased _____

Where is deceased buried? Cemetery _____

Section _____ Range/Tier _____ Lot/Crypt _____ Grave/Space _____

Was burial made in wooden case? _____ metal? _____ concrete? _____

Are there other remains in this grave? _____

Name on Burial Privilege Form to the above plot _____

Relationship of applicant to the owner of record _____

If owner of records is deceased, state the names of the surviving husband or widow, and children or other next of kin.

Relationship of applicant to the deceased _____

Name of Funeral Director _____

Has permission been obtained to open the above plot?

(If necessary a statement must be presented with this petition from the owner of burial privileges in the above plot)

If petition is approved:

Where will the remains be reinterred? Cemetery _____

Section _____ Range/Tier _____ Lot/Crypt _____ Grave/Space _____

Will the Burial Privilege Form to the above plots be presented? _____

Will the civil removal permit be obtained and presented? _____

Name on Burial Privilege Form to this plot _____

Relationship of applicant to owner of this plot _____

Reason for petitioning removal:

Signature of Petitioner _____

Address _____

State of Pennsylvania)
) SS.:
County of _____)

being duly sworn says: I am the applicant above named, I have read the foregoing statement and the same is true.

I hereby apply to the Diocesan Cemetery Authorities of the Diocese of Allentown for the removal of the remains herein referred to.

I hereby certify that I have jurisdiction over this removal and reinterment, and agree to indemnify said Authorities against any and all claims arising from this petition.

Sworn to before me this _____

day of _____, 19 _____

Witness _____

Address _____

Notary Public

Director of Cemeteries

Date

One copy is retained in the Diocesan Cemetery file and one copy is sent to the Diocesan Cemeteries office.