

All Permits will be issued by the Secretary, and must be paid for in advance. No burial allowed without a permit

APPLICATION FOR BURIAL PERMIT

THE RISING SUN CEMETERY

No. 1967

Rising Sun, Ind., _____, 19__

Name of Deceased _____ Rhonda Sue Hannah _____

Place of Nativity _____

Date of Birth _____ Mar. 1, 1967 _____

Date of Decease _____ Mar. 3, 1967 _____

Age _____ 2 days _____

Occupation _____

Single, Married or Widowed _____

Late Residence _____

Disease _____ Immaturity _____

Place of Death _____ Dearborn Co. Hospital _____

Parents' Name _____ Ronald & Sue John Hannah _____

Size of Coffin or Box, Length _____ Feet _____ In. Width _____ Feet _____ In.

In whose Lot to be Interred _____ Lot 5 W.H. _____ Sec. C _____ No. Grave 3 _____

Removed from _____

Name of Undertaker _____ Detmer _____ Permacrete vault _____

Permit applied for by _____