

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. 4965

Rising Sun, Ind., \_\_\_\_\_, 19\_\_\_\_

Name of Deceased \_\_\_\_\_ Otis Cleveland York \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Ky. \_\_\_\_\_

Date of Birth \_\_\_\_\_ July 24, 1889 \_\_\_\_\_

Date of Decease \_\_\_\_\_ June 29, 1956 \_\_\_\_\_

Age \_\_\_\_\_ 66 \_\_\_\_\_

Occupation \_\_\_\_\_ Merchant \_\_\_\_\_

Single, Married or Widowed \_\_\_\_\_ Married \_\_\_\_\_

Late Residence \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Disease \_\_\_\_\_ Broncho Pneumonia \_\_\_\_\_

Place of Death \_\_\_\_\_ Silver crest Hospital New Albany, Ind. \_\_\_\_\_

Parents' Name \_\_\_\_\_ Nicklos & Lydia Whaley York \_\_\_\_\_

Size of Coffin or Box, Length \_\_\_\_\_ Feet \_\_\_\_\_ In. Width \_\_\_\_\_ Feet \_\_\_\_\_ In.

In whose Lot to be Interred \_\_\_\_\_ Lot 21 E.C. 1/6 Sec. \_\_\_\_\_ D.R. No. \_\_\_\_\_ Grave I \_\_\_\_\_

Removed from \_\_\_\_\_ \_\_\_\_\_

Name of Undertaker \_\_\_\_\_ Humphrey \_\_\_\_\_ Permacrete vault \_\_\_\_\_

Permit applied for by \_\_\_\_\_