

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. 4734

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

Name of Deceased \_\_\_\_\_ Alfred Cornelias Webb \_\_\_\_\_

Place of Nativity \_\_\_\_\_ Ind. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Dec. 6, 1855 \_\_\_\_\_

Date of Decease \_\_\_\_\_ Mar. 9, 1932 \_\_\_\_\_

Age \_\_\_\_\_ 76-3-3 \_\_\_\_\_

Occupation \_\_\_\_\_ Farmer \_\_\_\_\_

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

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

Disease \_\_\_\_\_ Chronic \_\_\_\_\_

Place of Death \_\_\_\_\_ Rising Sun, Ind. \_\_\_\_\_

Parents' Name \_\_\_\_\_ Lyman & Nancy Webb \_\_\_\_\_

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

In whose Lot to be Interred \_\_\_\_\_ Lot 170 \_\_\_\_\_ Sec. D No. Grave 3 \_\_\_\_\_

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

Name of Undertaker \_\_\_\_\_ Steele \_\_\_\_\_

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