

Authorization for Burial  
Hillcrest Cemetery  
Phone: 919-460-4941  
E-mail: [virginia.johnson@townofcary.org](mailto:virginia.johnson@townofcary.org)

I, \_\_\_\_\_, the owner or authorized representative of the burial lot described below, do hereby authorize the following burial in the said lot:

Name of Deceased: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Date of Burial: \_\_\_\_\_

Time of Burial: \_\_\_\_\_

Type of Burial (Traditional or Urn): \_\_\_\_\_

Funeral Home in charge of arrangements: \_\_\_\_\_

Contact person: \_\_\_\_\_

Telephone number: \_\_\_\_\_

**Description of Lot:**

Lot is located in the **Old Section (sections A, B, C, D, E, F, G, H, I, L and M)** of the cemetery and is described as Lot # (if applicable) \_\_\_\_\_

**OR**

Lot is located in the **Newest Section (sections J & K)** of the cemetery and is described as Lot # \_\_\_\_\_

Signed and sealed this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

Witness:

\_\_\_\_\_

\_\_\_\_\_  
(Title, if applicable)