

**CITY OF BELLEVIEW
5343 SE ABSHIER BLVD
BELLEVIEW, FLORIDA 34420
(352) 245-7021 EXT 2103 – OFFICE
(352) 245-6532 – FAX
BUSINESS HOURS M-TH 7AM – 6PM**

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REQUEST FOR CEMETERY LOT MARKING

OWNER OF LOT: _____

NAME OF INTERRED: _____

DATE OF BIRTH: _____ DATE OF DEATH _____

DATE OF INTERNMENT: _____

CASKET _____ CREMAINS _____

OLD CEMETERY

BLOCK# _____ LOT# _____ SPACE# _____

NEW CEMETERY

UNIT# _____ SECTION# _____ SPACE# _____

(Units 1 & 3 cannot have above ground markers)

FUNERAL HOME OR MONUMENT COMPANY

PHONE# _____ FAX# _____

DATE: _____ SIGNATURE: _____