



INTERMENT ORDER
Town Of Lakeville
Cemetery Commission

As a licensed Funeral Director you are responsible to fill out and sign this Interment Order and to present it to a Cemetery Commissioner to include a copy of a death certificate, burial/transfer permit, and all fees prior to any opening. See, 239 CMR 3.01 and 3.13; M.G.L. c. 114, §§45 and 45A. Please also refer to the Town Of Lakeville Cemetery Rules & Regulations Pg 1/Par 7. For additional details visit <https://www.lakevillema.org/cemetery-commission>.

(Please print)

Full Name of Deceased: _____

Deceased Residence: _____
Street City/Town State

Born (month) _____ (day) _____ (year) _____ Date of Death: _____

Cause of death: _____ Next of Kin: _____

Date of Burial: _____ Casket : _____ Cremation: _____

Name of lot Owner: _____

Address of lot Owner: _____
Street City/Town State

If more than one grave, place an "X" for the selected grave



Signature of Lot Owner/next of Kin: _____

Phone # of Lot Owner/next of Kin: _____

Funeral Home Name: _____

Funeral Home Address: _____
Street City/Town State

Funeral Home telephone #: _____ Authorized signature: _____

(Section to be filled out by Cemetery Commissioner)

Buried (month) _____ (day) _____ (year) _____ Cemetery _____

Lot _____ Grave _____ Section _____ Cremation _____

Cemetery Commissioner Signature/ date