



# Catholic Cemeteries

Invoice# \_\_\_\_\_

ARCHDIOCESE OF NEWARK

## HOLY CROSS CEMETERY

### Monument/Inscription Authorization

*(Please Print & Complete in Full)*

Date: \_\_\_\_\_

The undersigned request permission to employ:

Dealer's Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

To do the following work in: **Block** \_\_\_\_\_ **Section** \_\_\_\_\_ **Tier** \_\_\_\_\_ **Number** \_\_\_\_\_ **Grave#** \_\_\_\_\_  
*(Please indicate fully what work is to be done)*

\_\_\_\_\_

The undersigned rightful holder or legal representatives of above-mentioned lot hereby authorizes, and permits said dealer to do the above-mentioned work, subject, however, to all rules and regulations of the cemetery.

Name: \_\_\_\_\_  
*(Please Print)*

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WE ACCEPT AMEX, MASTERCARD, VISA & DISCOVER

#### FOR CEMETERY OFFICE USE ONLY

Deed#: \_\_\_\_\_ Certificate Date: \_\_\_\_\_ Location: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ CSR Name: \_\_\_\_\_  
*(Initials)*

Date Rec'd: \_\_\_\_\_ Date Scanned: \_\_\_\_\_

#### Please mail form to:

340 Ridge Road - N. Arlington, NJ 07031

Office: 201-997-1900

Visit us at: [www.rcancem.org](http://www.rcancem.org)

**(Note: See Over)**

**Holy Cross Cemetery**  
**340 Ridge Road, N. Arlington, NJ 07031**

**Width:** \_\_\_\_\_ **Thickness:** \_\_\_\_\_ **Height:** \_\_\_\_\_

**Base: (if applicable) Width:** \_\_\_\_\_ **Thickness:** \_\_\_\_\_ **Height:** \_\_\_\_\_

**Kind of material to be used:** \_\_\_\_\_

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Producers of memorialization materials, i.e. quarries, quarries who also manufacture memorials, and manufacturers of memorials not quarries, in order to secure the acceptance of their stone in the cemetery, must agree to sell only first grade, clear stone for memorial purposes. Producers must also be willing to guarantee that such stone is free from sap or anything which would cause rust stains that it will not check or crack. Producers must also agree that should such faults develop within five years from the date of setting, the memorial will be replaced without cost to the cemetery, or plot holder, by the same quarry which manufactured the memorial, or the quarry will make an adjustment on material, such adjustment not to delay the replacement of the memorial in the cemetery.

Retail dealers, to secure approval of the cemetery, must agree to use only first grade stone from approved producers as provided above and must guarantee the memorial to be executed in first grade workmanship. Retail dealers also agree that should faults develop within five years due to the setting, treatment or handling of the memorial by the retail memorial dealer, the memorial will be replaced by the retail memorial dealer without cost to the cemetery or plot holder.

**Manufacturer's Signature/Seal**

\_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Dealer's Signature Seal**

\_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone:** \_\_\_\_\_

**Sketch design below, giving dimensions**

***\*All Monuments Must Have A Cross\****

**FOR CEMETERY OFFICE USE ONLY**

**Sketch Approval:** \_\_\_\_\_

**Installation Approval:** \_\_\_\_\_

The Block, Section, Tier and Grave Number as it appears on the Certificate of Right of Interment must be engraved on all monuments-placement to be determined by the individual cemetery.