

OWNER'S ORDER FOR INSTALLING MEMORIAL TABLET

Olivewood Memorial Park

3300 Central Avenue

Riverside, CA 92506

Office: 951.683.6611 Fax: 951.683.0110

www.olivewoodcem.com

Date : _____

You are hereby authorized to set a marker/memorial table furnished by:

(Name of marker company or person to purchase marker)

On the grave of: _____
(Name on marker **must** match name on burial permit)

Regulation size: _____ X _____

I hereby certify that I am the owner of the property in which the above named deceased is interred, or that I have the permission of the lot owner to order this installation. It is understood that this marker is to be made according to your regulations and that the marker setting charge will be paid prior to delivery/acceptance of this marker.

X _____
Signature of Lot Owner

Print Name

Address

City State Zip

Phone

Regulation Sizes:

Setting Fee:

Granite Bronze

Baby Grave: 12 x 6 Straight Cut or 16 x 10 LMP & 2" Bevel **\$425.00**

Cremation Garden: 20 x 10 Straight Cut **\$410.00**

Adult Grave: 24 x 12 Straight Cut **\$475.00 \$575.00**

Adult Grave: 28 x 16 LMP or w/2" Bevel or 30 x 18 w/3" Bevel **\$450.00**

Companion Side x Side: 36 x 14 Straight Cut or 40 x 18 LMP or w/2" Bevel or 42 x 20 w/3" Bevel **\$575.00 \$690.00**

****Granite MUST be 3" thick**

****Bevel surface face MUST equal Straight Cut size**

****Name/Dates on marker MUST match name/dates as shown on the Permit for Disposition of Human Remains (Burial Permit) issued by the Dept. of Public Health.**