

Interment Right and Cemetery Property Request Form

Please complete this form if you need to transfer, update, or verify an interment right or cemetery property record. Required documents and fees vary depending on the type of request.

Request Type

Affidavit of Heirs

If the interment right is not included in a Will or Trust, an **Affidavit of Heirs** is required. Please review the attached Health and Safety Code Section 8603 and provide the names and addresses of all heirs at law, along with copies of death certificates if applicable. After we receive the required information, we will prepare the **Affidavit of Heirs Form** for your signature and notarization. A \$350.00 fee applies.

Termination of Joint Tenancy

If a joint tenant is deceased and you would like to complete a **Termination of Joint Tenancy**, please submit a copy of the deceased joint tenant's death certificate. Upon receipt of the documents, we will prepare the **Termination of Joint Tenancy Form** for your signature and notarization. A \$125.00 fee applies.

Affidavit of Name Change

If your name has changed and you would like to complete an **Affidavit of Name Change**, please provide supporting documentation showing the name change. Once received, we will prepare the **Affidavit of Name Change** for your signature and notarization. A \$125.00 fee applies.

Representative or Power of Attorney

If you are acting on behalf of the owner of an interment right, please include a copy of the Power of Attorney with your request.

Will or Trust

If an interment right or cemetery property was left to you in a **Last Will and Testament** or **Trust**, please submit a copy of the applicable document, along with any required death certificate(s). Upon receipt of the documents, we will review them and contact you with the next steps.

Applicant Information

Name: _____

Address: _____

Phone Number: _____ Email Address: _____

Original Rights Holder Information

Name of Original Rights Holder: _____

Plot Location / Interment Space Description

Lot/Crypt/Niche: _____ Plot/Sanctuary/Alcove: _____

Division: _____ Grave(s): _____ Mausoleum: _____

Interment Space Type: ☐ Single ☐ Double

Signature and Date

By signing below, I certify that the information provided is true and accurate to the best of my knowledge.

Signature: _____ Date: _____