Town of Marshall Monument / Marker Permit – Schedule "B" Bylaw 07-2010

Permit No	Da	te:	_
Name of Monument Company:			_
Phone: ()Fax: ()O	ther: ()	_
Name of Purchaser:	Named of Decea	sed:	_
Address of Purchaser:	Pr	one: ()	_
Location of Grave: Block No:	Plot No.:	Lot No	_
Type of Monument:	Material Used:		
□ Flat	□Granite	□ Bronze	
□ Pillow	■ Marble		
□ Upright	□ Composite Gr		
Other:	•	Other:	
Size of Monument: Length:	Width: Height: _		
□ Im	nperial	ric	
shall be constructed to surface level and shall proje be installed without a foundation providing it is set s Description of Monument: (give name	so that the top is flush with the gro	und surface.	
Provide a sketch:			
Front View Application Completed By:		Side View	
· · · · · · · · · · · · · · · · · · ·			
Signature of Applicant:			
Office Use Only:			
Nonument approved for placement by:			
Signature of Approver:Da			
Payment: Fee: \$ Method of			
additional Comments:			