



Full Name of Person for whom the Niche is intended:

\_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Death (if appropriate) \_\_\_\_\_

Name of Grantee \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ email \_\_\_\_\_

Date of Application \_\_\_\_\_

Signature \_\_\_\_\_

Deposit \$ \_\_\_\_\_ Date received \_\_\_\_\_

Balance \$ \_\_\_\_\_ Date received \_\_\_\_\_

Niche Designation \_\_\_\_\_

(determined at time of final payment)

Application Accepted By \_\_\_\_\_

Date application accepted \_\_\_\_\_

Recorded in the Park Lake Presbyterian Church Columbarium Registry

\_\_\_\_\_

date