## ENTOMBMENT AUTHORIZATION

	<u>Fairfax</u>
	MEMORIAL PARK 9900 Braddock Rd., Fairfax, VA 22032 (703) 323-5202 <u>www.fmpark.com</u>

Owner #: \_\_\_\_\_

To the Superintendent of Fairfax Memorial Park:

You are hereby authorized to open the following crypt/niche in Fairfax Memorial Park, Fairfax, Virginia:

Maus/Colum/Crypt:	Section:	Level:	Crypt/Niche :
For the entombment of:			
On: (Date)	Day:	At:	A.M 🗌 P.M.

The undersigned hereby certify that they are the legal custodian(s) (legally designated representative(s) and/or next of kin) of the herein named deceased, having the full legal authority to direct the entombment of the remains of the deceased, and hereby authorize Fairfax Memorial Park to make disposition of the remains of the deceased as indicated above. The undersigned hereby further certify and represent that they are the owner(s) or authorized representative(s) of the owner(s) of the above-described Entombment Right and hereby authorize use of said Entombment Right for the entombment of the remains of the herein named deceased. Fairfax Memorial Park is hereby authorized to install any memorial purchased in connection with this entombment in the Entombment Right described herein, and I/We shall be responsible for all charges connected therewith. Furthermore, I understand and agree that all casketed entombments will utilize the Ensure-a-Seal or Kryprotek products.

The undersigned hereby certify that the remains provided to Fairfax Memorial Park are, in fact, the remains of the above named deceased. The undersigned further agree that it is not the responsibility of Fairfax Memorial Park to verify the identity of the deceased before entombment or inurnment.

The undersigned hereby agree to defend and indemnify Fairfax Memorial Park, its agents and employees from any and all liability, and against any loss it or any of them may sustain in connection with the entombment authorized above. This indemnity does not apply to the operations of Fairfax Memorial Park, but solely to the representations made by the undersigned with regard to the above authorization.

I/We understand that for the safety and well-being of those attending the service at the Cemetery, it is requested that the families return to their vehicles during the removal of the tent, equipment, and the closing of the crypt of niche.

Signature of Lot Owner

Relationship to Deceased

Signature of Next of Kin (If other than Owner) Relationship to Deceased