**Arlington East Hill Cemetery**

**Interment Order**

**Please Forward to** **brenda@arlingtoneasthillcemetery.com**

**48 hours or more Prior to the Day of the Interment**

**Date:**

**Funeral Home Name:**

**Name of Deceased:**

**Was the deceased a veteran?**

**Please ask a family member the Location of Grave:**

**Section Lot Space**

**If they are not certain, please record a contact person and phone number for us to call:**

**Name: Phone Number:**

**Type of Interment (Traditional, Cremation Remains in Grave, Cremation Remains in a Columbarium Niche, Cremation Remains in a special Headstone):**

**Date, time and place of services:**

**Date and approximate time of interment:**

**Name of Vault Company:**

**Check our Current Price List on our Website** [**www.arlingtoneasthillcemetery.com**](http://www.arlingtoneasthillcemetery.com) **for Charges:**

**Contact Person at Funeral Home in case of questions**

**Telephone number or email address:**

**Please bring check payable to the Arlington East Hill Cemetery to the cemetery at time of burial. Brenda or another representative of the Association will be there to sign the burial permit and to collect the check. Questions: email Brenda or call (765) 663-2410.**