



City of Toledo Municipal Cemeteries

Interment Order Request

Phone (419) 936-3081

Fax (419) 936-3087

Date: _____ Time: _____ Funeral Director Phone #: _____
 Funeral Director: _____ Funeral Director Fax #: _____
 Funeral Home: _____
 Name of Deceased: _____
 Address (Deceased): _____
 Date of Birth: _____ Date of Death: _____ Age: _____
 Next of Kin: _____ Relationship: _____
 Address (Next of Kin): _____
 Telephone Number (Next of Kin): _____
 Type of Service (Check One): Burial Cremation
 Cemetery (Check One): Collingwood Forest Haughton Maplewood Stateline
 Vault Type: _____ Manufacturer: _____
 Requested Date of Service: ____/____/____ (Month/Day/Year) Day of Week: _____
 Available Service Times: Based on the service Expected Time of Arrival (ETA) at the cemetery gate.
 (Check One): 9:00am 10:00am 11:00am 12:00pm 1:00pm 2:00pm
 Lot Owner (Check One): Yes No

Fill Out Below Only If Known- (City of Toledo will provide a confirmation upon matching with our cemetery records.)

Section _____ Block/Lot _____ Row _____ Grave _____

IMPORTANT

~City of Toledo Cemetery Office **MUST** confirm date and time of service for set appointments!

~Services will be scheduled in the order requests are received. Requests for weekday services must be received by 12:00pm the day before a requested service. Requests for Saturday service must be received by 12:00pm on Wednesday.

~Please Note: The City of Toledo reserves the right to schedule services on the following day/days based on the daily volume (maximum of 4 services per weekday; maximum of 2 services per weekend).

~Saturday Service will not be scheduled after 11:00am without overtime charges.

~Overtime Charges apply for services that enter the cemetery gate after 2:00pm weekdays and 11:00am Saturdays. The overtime charge is \$110/half hour. Saturday services are an additional \$250.

~Funeral Director must contact Cemetery Foreman 20 minutes prior to arrival at 419-466-6005.

Funeral Director Signature: _____ Date: _____

City of Toledo Confirmation and Total Due		Lot Price: _____
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	Cemetery: _____	Open/ Close: _____
Date: _____ Time: _____	Receipt # _____	Vault Setting: _____
City of Toledo Representative: _____	Date: _____	Overtime: _____
		Other: _____
		Total Due: _____