

Application for Right of Burial City of Mackinac Island, Michigan

(As prescribed and provided for under Ordinance No. 323)

Name(s): _____

Resident Address: _____

(Physical and/or P.O. Box)

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Cell Phone: _____

Email Address: _____

Catholic Cemetery: _____ Protestant Cemetery: _____

Number of Lots Applied for: _____ Lot Numbers: _____

Resident: _____ Non-Resident: _____ Cremation: _____ Full Burial: _____

Signature of Applicant: _____ **Date:** _____

For the purpose of this ordinance, "Resident" is defined as an owner of real property located within the City of Mackinac Island that is designated as the owner's principal residence as defined in MCL 211.7cc, and said designation has been in place continually for not less than 10 years precedent the application for right of burial; or a person who has resided continuously within the City of Mackinac Island for a period of 10 years precedent the application for right of burial; or a spouse or any lineal descendent of an existing owner of a right of burial. The city Cemetery Board reserves the authority to make exception to the definition upon an applicant's disclosure showing personal connection to Mackianc Island as determind solely by the Cemetery Board.

Representative Signature: _____ **Date:** _____

(Lot(s) location, identification, and verified by an authorized representative of the Cemetery Board)

Resident: \$400.00 per 4 x 8 lot

Non-Resident: \$10,000.00 per 4 x 8 lot

Perpetual Care: \$300.00 per burial

Lot/Plot Corner Marker: \$25.00 (set of 4)

FOR CITY USE ONLY

Right of Burial Paid: \$ _____ Ck#: _____ Perpetual Care Paid: \$ _____ Ck#: _____

Corner Markers Paid: \$ _____ Ck#: _____

Received by: _____ Date Received: _____