

# Application for Right of Burial City of Mackinac Island, Michigan

(As prescribed and provided for under Ordinance No. 585)

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: \_\_\_\_\_

Full Burial: \_\_\_\_\_ Cremation Burial: \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For the purpose of this ordinance, a qualified purchaser is defined as follows:

A person who has resided a total of ten (10) years on Mackinac Island for at least 273 days per calendar year, preceding the application for a right of burial.

The City of Mackinac Island Cemetery Board reserves the authority to make exception to the aforementioned definition upon an applicant's disclosure showing personal connection to Mackinac Island as determined solely by the Cemetery Board.

**Representative Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

Lot: \$400.00 per 4 x 8 lot

Perpetual Care: \$300.00 per burial

Corner Markers: \$25.00 (set of 4)

**FOR CITY USE ONLY**

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

Corner Markers Paid: \$ \_\_\_\_\_ Ck#: \_\_\_\_\_ Received by: \_\_\_\_\_