

APPLICATION FOR HEADSTONE FOR A DECEASED SERVICE MEMBER'S GRAVE
Under Subdivision (b) Article 5 of the General County Code of 1929, as amended

1. I (We) hereby make the application for the erection, at cost not to exceed _____ of a (check memorial desired).

- HEADSTONE
- LETTERING ON EXISTING HEADSTONE
- BASE FOR A GOVERNMENT HEADSTONE

To be erected on the grave of: _____

Whose service was as follows: _____ SS No: _____

ENLISTED : DATE _____ Place: _____

DISCHARGED : DATE _____ Place: _____

Veteran was a legal resident of the state of _____ at the time of enlistment.

RANK _____ Serial Number _____

ORGANIZATIONS SERVED WITH: _____

TYPE OF DISCHARGE _____

2. Give the following information about his (her) death and burial:

Death : Date _____ Place _____

Burial : Date _____ Place _____

Location of Cemetery _____
(City, Borough, Town, or Township, Country, State)

Location of Grave: Section _____ Range _____ Lot _____ Grave _____

3. Name and address of contractor _____

4. Place of Birth _____ Date of Birth _____

5. I certify that there has *never been a memorial on the grave of this veteran.

6. The veteran was a legal resident of _____ County at the time of his (her) death and lived in _____ County for _____ years and _____ months immediately preceding death.

(Signature)

Address _____

Relationship to Veteran _____

Part II – Certification of Service

(To be completed by representative of County Commissioners)

I certify that I have examined the proof of service of the within named veteran and find that the statements made herein are correct, and that such service during the _____ War and residence at the time of death entitles the applicant to the benefits of Subdivision (b) Article 5 of the General County Code of 1929, as amended.

Director of Veteran's Affairs

(To be forwarded to the contractor)

ERECTION AUTHORIZATION

You are hereby authorized to erect a _____

On Grave No. _____, Lot No. _____, Section _____, in _____

Cemetery located in _____, PA, as per your _____ amounting to \$ _____

This memorial is to be inscribed as follows: _____
(Name of Veteran)

(Year of Birth) (Year of Death) (Rank) (Company) (Regiment) (Division) (War)

Commissioner

Commissioner

Commissioner

(To be returned by the contractor on the completion of the work)

CERTIFICATION OF ERECTION

To the Commissioners of _____ County, _____

I certify that I have erected a _____

On the grave of _____

At a cost of \$ _____, as per the Erection Authorization appearing on the reverse of this form.

(Name of Firm)

By _____
(Name) (Title)

Sworn and subscribed before me this _____

day of _____, 20 _____

(Notary Public)

(NOTE: Payment of this account will not be made until this completed form is returned by the contractor.)

PART III – *Authorization for Payment*

We have satisfied ourselves that the within named deceased service member had a legal residence in the county of _____ at the time of his (her) death, that a _____ has been erected on his (her) unmarked grave, and that _____ should be paid the sum of \$ _____ for the erection of the ordered material.

Commissioner

Commissioner

Commissioner

Part IV – Warrant Order

Warrant No. _____ should be drawn in payment of this account, to the order of _____.

(Controller of Treasurer)