Oak Grove Cemetery
334 S. Sandusky Street
Delaware, Ohio 43015
740-363-2971
oakgrove@delawareohio.net

Consent to Inter Cremains

I/We, the heirs of _____, give permission for the cremains of

_____ to be interred on the grave of _____

_____ in Oak Grove Cemetery, 334 S. Sandusky St., Delaware, Ohio, 43015,

Lot/Row_____, Space(s)_____, Block_____ of

the _____ Section.

By signing this form I forfeit my right of interment and give permission for the grave to be marked.

_____	_____
Name	Date
_____	_____
Name	Date
_____	_____
Name	Date
_____	_____
Name	Date
_____	_____
Notary or City Official	Date