



City of Cuero  
INTERMENT PERMIT APPLICATION

112 Leonard Roy Harmon Drive  
Post Office Box 660  
Cuero, Texas 77954  
Hours: 7:30AM-5:00PM Monday-Thursday 7:30AM-1:30PM Friday  
Telephone: 361.275.0000, 361.275.9460  
Fax: 361.210.8162  
Emergency: 361.275.1422

Application is hereby made and fee of \$75.00 collected for the City of Cuero to issue a permit granting permission to open the following described grave space in the Hillside Cemetery.

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Space \_\_\_\_\_

For the purpose of burying the remains of the deceased at \_\_\_\_\_ am/pm, on the \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_.

**Deceased:**

Full Name: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Place of Death: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Date of Death: \_\_\_\_\_ Age at Death: \_\_\_\_\_  
Cremation: \_\_\_\_\_ Casket: \_\_\_\_\_

**Next-of-Kin/Contact:**

Name: \_\_\_\_\_ Relationship to Deceased: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_  
Home Work Cell

**Funeral Home:**

Funeral Home: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

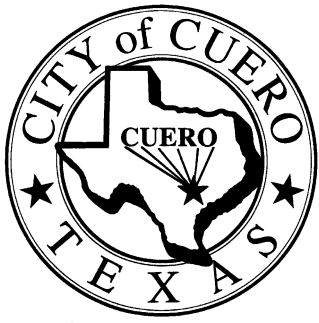
**Grave Excavator:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_

**Cemetery Director:** Marked for interment at \_\_\_\_\_ am/pm, on the \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_.

**Location of Grave Site**

|          |          |          |          |
|----------|----------|----------|----------|
| <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> |
| <b>5</b> | <b>6</b> | <b>7</b> | <b>8</b> |



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