CEMETERY INFORMATION





We are providing this book as a helpful guide for cemetery installation and regulations for area cemeteries. If you wish to contact them direct for further information, we have included the addresses and telephone numbers.

The installation fees and regulations are current to the best of our knowledge.

If we are notified of any increases or changes, we will fax you the information as soon as possible so you may update your records.

Inch Memorials will provide footings for cemeteries that do not have a sexton or caretaker to install them. Fees for these foundations are as follows:

\$1.00 per square inch - minimum charge of \$200.00

For foundations over 60" in length, please contact our office at 1-800-642-9006 for pricing.

\$3.00 a loaded mile over 60 miles from Northville, MI

PRICES AND REGULATIONS SUBJECT TO CHANGE WITHOUT NOTICE

May 3, 2024

580 South Main Northville, MI 48167 (248) 349-0770 1-800-642-9006 Fax(s) (248) 349-5221 1-800-285-3705 www.inchmemorials.com email: sales@inchmemorials.com

AARON WEBSTER

Address	150 S. SQUIRREL RD.					Form Required:	Yes	No	Χ
City	AUBURN HILLS	State	MI	Zip	48326	Grave Location Required on Memorial:	Yes	No	Χ
Phone	(248) 370-9402					Symbol Required on Memorial:	Yes	No	Χ
Fax						If yes, what symbol?			
Email	cityclerk@auburnhills.org					Benches Permitted:	Yes	No	Χ
Contact	CITY CLERK (CITY OF AUBURN HILLS	Phone S)	(248) 370	-9402		Borders Required on Foundation:	Yes	No	Χ
			Ru	iles & Regulat	ions - Installatior	Fee			
ANY STY	LE OF MARKERS AND MO	ONUMENT	S ALLOWE	D. CALL CLE	RKS OFFICE AT				
(248) 370	-9402 BEFORE DELIVERY	ſ.							
FOUNDA	TION FEE:								
24" - \$225	5.00								
36" - \$235	5.00								
48" - \$245	5.00								
OVER 48	" - \$255.00								
Notes: #	OF FULL BURIALS PER C	GRAVE: 1	# OF CRE	MATION BURI	ALS PER GRAVE	: 2			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
CITY OF	AUBURN HILLS					WEATHER PERMITTING (CALL FIRS	Γ)		
1827 N. S	QUIRREL RD.					Fall/Winter Delivery "cutoff" (date):			
AUBURN	HILLS, MI 48326					WEATHER PERMITTING (CALL FIRST	Γ)		

ACACIA PARK

Address	31300 SOUTHFIELD RC	DAD				Form Required: FORM	Yes	Х	No			
City	BEVERLY HILLS	State	MI	Zip	48025	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(248) 646-4228					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(248) 646-8348					If yes, what symbol?			_			
Email	icarruthers@acaciaparkn	ni.com				Benches Permitted:	Yes	Х	No			
Contact MMG	ISKA CARRUTHERS	Phone	(248)	646-4228		Borders Required on Foundation:	Yes	L	No	Χ		
				Rules & Re	gulations - Instal	llation Fee						
BRONZE	, GRANITE AND MONUM	ENTS ALL	OWED	(IN DESIGNA	TED AREAS).							
BRONZE	MUST BE MOUNTED ON	N GRANITE	E PRIOF	R TO DELIVE	RY.							
FLUSH N	O SMALLER THAN 30x1	2x4										
	SECOND MARKER ON	GRAVE CA	AN BE 2	4x12x4 IF 30	x12x4 IS ALREAD	DY SET ON GRAVE POLISHE	ED BOF	≀DER				
	20x28x4 DOUBLE INTERNMENT ALLOWED ON GRAVE NOT REQUIRED											
	FEES:											
	Flagging Fee:	\$175.00	Payable	to Acacia Pa	ırk							
	Setting Fee:	\$1.00 PS	SI payab	le to Inch Mer	morials							
	Foundation Fee:	\$1.00 PS	SI Payab	ole to Acacia F	Park							
1.00 PSI	FOR MONUMENTS AND	BENCHES										
MEMORI	AL REMOVAL FEE - \$75.0	00										
Notes: #	OF FULL BURIALS PER GRA	AVE VARIES	S (PLEAS	SE CALL). # O	F CREMATION BU	RIALS PER GRAVE 2						
					-							
Installati	on Fee Payable to:					Spring delivery begins (date):						
ACACIA I	PARK CEMETERY					MARCH 1ST						
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):						
https://ww	w.acaciaparkcemeterymic	higan.com	<u>/</u>			OCTOBER 31ST	OCTOBER 31ST					

ADAT SHALOM MEMORIAL PARK

Address	28500 W. 6 MILE ROAD					Form Required: FORM	Yes	X	No	
City	LIVONIA	State	MI	Zip	48152	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(734) 421-7915					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 851-3190					If yes, what symbol?				
Email	dgallagher@adatshalom.c	<u>org</u>				Benches Permitted:	Yes		No	Х
Contact	DENISE GALLAGHER	Phone	(248) 851-	5100		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulati	ons - Installation	Fee				
NO BRON	ZE OR MARBLE ALLOWE	D.								
FLUSH AN	ND BEVELS ALLOWED. S	LANTS UF	TO 18" TA	ALL						
МОМИМЕ	NTS ALLOWED IN DESIG	NATED AF	REAS PLEA	SE CALL FOR	R PRIOR APPRO\	/AL.				
(Minimun	of 8 contiguous spaces)									
NO BASE	S ON SLANTS.									
NAME ON	BACK OF MONUMENTS	OR SLANT	S IS RECO	OMMENDED, E	BUT, NOT REQUI	RED				
FOUNDAT	ΓΙΟΝ FEE:									
SINGLE M	IARKER - 24"x 12" \$300.00	O - NO COM	IPANIONS							
SINGLE S	LANT - 24"x 10" \$300.00									
MONUME	NT FOUNDATIONS - \$125	5.00 PER S	QUARE FO	OOT FOR BAS	E					
WEBSITE	:									
www.ASI	MP.US FOR GRAVE LOCA	ATIONS		<u>Ca</u>	sh Check and all	Credit Cards in office				
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CRE	MATION BURI	ALS PER GRAVE	: 1				

Installation Fee Payable to: ADAT SHALOM MEMORIAL PARK

Mail to: ADAT SHALOM SYNAGOGUE

29901 MIDDLEBELT

FARMINGTON HILLS, MI 48334 ATTN: DENISE

Spring delivery begins (date):

WEATHER PERMITTING (GENERALLY APRIL 15TH)

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

<u>ALBAN</u>

3717 CLINTON MACON ROAD

CLINTON, MI 49236

A -l -l	E DEMIC DD					Farms Danwinsell	V]					
	E. BEMIS RD.					Form Required:	Yes		No	X				
City	YPSILANTI	State	MI	Zip	48197	Grave Location Required on Memorial:	Yes		No	Х				
Phone	(734) 663-5018					Symbol Required on Memorial:	Yes		No	Х				
Fax	(734) 663-2847					If yes, what symbol?			_					
Email	FORESTHILL_CEM@SB	CGLOBAL	.NET			Benches Permitted:	Yes	Х	No					
Contact	LARRY SANBORN	Phone	(734) 36	8-7949		Borders Required on Foundation:	Yes		No	Χ				
			R	Rules & Regula	tions - Installatio	n Fee								
FOUNDA	TION FEE:													
.65 PSI, N	11NIMUM \$180.00													
BRONZE,	FLUSH GRANITE, SLAN	TS, BEVEL	S, AND M	MONUMENTS										
34" MAXII	MUM FOR SINGLE													
MIN 4" TH	MIN 4" THICK GRANITE/MARBLE. ALL MEMORIALS MUST COMPLY WITH THE CEMETERY APPEAL,													
NON TRA	DIONAL MONUMENTS W	ILL NEED	TO BE A	PPROVED BEF	FORE PLACEMEN	т.								
(THE CEN	METERY HAS A RIGHT TO	O REMOVI	E OR NO	T ACCEPT AN	UNDESIRED MON	UMENT)								
Notes: # (OF FULL BURIALS PER GRA	\\/F·1 #∩	F CREMAI	NS PER GRAVE	· 2 OR 1 FIII I AND	1 CREMATION PER GRAVE								
1101001 # (5. 1 SEE BOILINES I EIL OIL		OKEWA!	INO I EN ONAVE	. Z ON THOLE AND	ONE MATTER STATE								
Installatio	on Fee Payable to:	CASH OR	CHECK	ONLY		Spring delivery begins (date):								
LARRY S	•					WEATHER PERMITTING								

Fall/Winter Delivery "cutoff" (date):

OCTOBER 1ST for foundation orders to be completed that year

ALL SAINTS

Address	4401 NELSEY ROAD					Form Required: FORM	Yes	Х	No		
City	WATERFORD	State	MI	Zip	48329	Grave Location Required on Memorial:	Yes		No	Х	
Phone	(248) 623-9633					Symbol Required on Memorial:	Yes		No	Х	
Fax	(248) 623-2311					If yes, what symbol?			_	_	
Email	bhall@mtelliott.com					Benches Permited: Designated areas	Yes	Х	No		
Contact	BRUCE HALL	Phone	(248) 623	-9633		Borders Required on Foundation:	Yes		No	Х	
			Ru	les & Regulat	ions - Installatio	n Fee					
FOUNDA	TION FEE:										
16"x 8"x 4	" INFANT SECTION - \$35	0.00									
24"x 12"x 4" SINGLE GRANITE MARKERS ONLY ALLOWED (INCLUDING GOVERNMENT) - \$350.00											
MONUME	NTS IN DESIGNATED AF	REAS. MOI	NUMENTS	NO MORE TH	IAN 7' IN HEIGHT	, INCLUDING THE BASE.					
BASE MIN	NIMUM 10" WIDE & 8" IN H	HEIGHT. M	ONUMEN	T MINIMUM TH	HICKNESS OF 8",	MINIMUM HEIGHT					
OF 30", N	IINIMUM LENGTH OF 36"										
MONUME	NTS, BENCHES, AND CF	REMATION	MEMORIA	LS - \$600.00							
GREEN B	URIALS - BOLDERS ONL	Υ									
Notes:	One marker per grave, 2	names al	lowed on r	narker							
# (OF FULL BURIALS PER G	RAVE: 1									
#	OF CREMATION BURIALS	PER GRAVI	E: 2 OR 1 F	ULL AND 1 CRI	EMATION PER GRA	AVE					

Installation Fee Payable to:
ALL SAINTS CEMETERY
(SAME ADDRESS AS ABOVE)

Spring delivery:	Please
WEATHER/GROUNDS PERMITTING	call before
Fall/Winter delivery:	delivery
WEATHER/GROUNDS PERMITTING	

ARBORCREST MEMORIAL PARK

Address	2521 GLAZIER WAY					Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip	48105	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 761-4572					Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 663-2607					If yes, what symbol?			-	
Email	arborcrestcemetery@gma	ail.com_				Benches Permitted: Designated areas	Yes	Х	No	
Contact	WALTER	Phone	(734) 761-	4572		Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulat	ions - Installation	Fee				
MUST HA	VE GRANITE BASE UND	ER BRONZ	E. BRONZ	E, FLUSH, SL	ANTS AND MONU	JMENTS ALLOWED.				
CALL FO	R PRICING VERIFICATION	N AND RE	GULATIONS	S PER SECTION	ON AS PRICES AF	RE REVIEWED				
THROUG	HOUT THE YEAR. ANY O	OLOR GR	ANITE BRO	NZE BASE IS	S ALLOWED.					
FOUNDA	TION FEE:									
SINGLE \$	575.00 - CONFIRM WITH	CEMETER	RY							
COMPAN	ION UP TO 48"x 18" \$775	.00 - CONF	IRM WITH	CEMETERY						
CALL CEI	METERY FOR LARGER M	ARKERS								
Notes: #	OF FULL BURIALS PER G	SRAVE: 2	# OF CREM	MATION BURI	ALS PER GRAVE:	NO LIMIT (CALL FIRST)				
	Face Bassell' :	01-01								
	on Fee Payable to:	Cash, Ch				Spring delivery begins (date):				
	REST MEMORIAL PARK	CC VIA	Phone			YEAR ROUND (CALL FIRST)				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				

YEAR ROUND (CALL FIRST)

ARGENTINE TOWNSHIP

Address	(ON SILVER LAKE RD.) 1/2	MILE E OF	ARGENTIN	IE RD.		Form Required:	Yes		No	Х	
City	LINDEN	State	MI	Zip	48451	Grave Location Required on Memorial:	Yes		No	Х	
Phone	(810) 735-5050					Symbol Required on Memorial:	Yes		No	Χ	
Fax						If yes, what symbol?					
Email	argentineoffice@argentine	etownship.	<u>com</u>			Benches Permitted:	Yes	Х	No		
Contact	JANE LEFLER SEXTON: NANCY HIEBER	Phone Phone	(810) 735 (989) 27			Borders Required on Foundation:	Yes		No	Χ	
					tions - Installation	Fee					
FLUSH,	SLANTS, BEVELS & MONU	IMENTS									
ŕ	·										
FOUNDA	ATION FEE:										
.50 PSI,	\$150.00 MINIMUM										
Notes: #	OF FULL BURIALS PER GRA	AVE: 1									
	# OF CREMATION BURIALS F	PER GRAVI	E: 2 OR 1	FULL AND 1 CR	EMATION PER GRA	VE					
Installati	on Fee Payable to:					Spring delivery begins (date):					
GENESE	E VALLEY VAULT					WEATHER PERMITTING					
10510 N	HOLLY RD.					Fall/Winter Delivery "cutoff" (date):					
HOLLY,	MI 48442					WEATHER PERMITTING					

ASSUMPTION GROTTO

A . I . I	40770 OD ATIOT AVE					Free Bree Seed			l					
	13770 GRATIOT AVE.					Form Required:	Yes		No	Х				
City	DETROIT	State	MI	Zip	48205	Grave Location Required on Memorial:	Yes		No	X				
Phone	(313) 372-0762					Symbol Required on Memorial:	Yes	Χ	No					
Fax	(313) 372-2064					If yes, what symbol? Cross			1					
Email	grottorectory@ameritech.	<u>net</u>				Benches Permitted:	Yes		No	Χ				
Contact	RACHAEL FLORA	Phone	(313) 372-	0762		Borders Required on Foundation:	Yes		No	Х				
			Rul	les & Regulati	ions - Installation	Fee								
FLUSH, L	IPRIGHT SLANTS, GRANI	TE OR MA	RBLE ONL	Υ										
MONUME	NTS NEED PRIOR APPR	OVAL												
FOUNDA	TION FEE:													
SINGLE	 FLAT 24"x 12"x 4" \$250.00	- max allo	wed on a sir	ngle grave 24"										
COMPAN	COMPANION & SLANTS \$350.00 (EACH TIME SET) IF NECESSARY TO REMOVE													
	COMPANION & SLANTS \$350.00 (EACH TIME SET) IF NECESSARY TO REMOVE													
PRIOR TO	D DELIVERY:													
	 CTORY @ 313-373-0762 (OR EMAIL	arottorecto	orv@ameritec	h.net AND ADVIS	E NAME ON STONE								
Notes: # 4		VE. 4 # 05				V 4 STONE DED CDAVES								
Notes: # (OF FULL BURIALS PER GRA	VE. 1 # OF	CKEWATIO	IN DUKIALS PE	K GRAVE: 4 - (UNL	1 1 STONE PER GRAVE)								
In atalleti	y Faa Dayahla ta					Coming delivery begins (deta)								
	on Fee Payable to:					Spring delivery begins (date):								
	TION GROTTO					MAY 15TH								
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):								
						OCTOBER 15TH								

BEEBE

HOLLY, MI 48442

Address	ROSE CENTER & FISH L	AKE ROA	DS			Form Required:		Yes		No	Х
City	HOLLY	State	MI	Zip	48442	Grave Location Required on M	lemorial:	Yes		No	Х
Phone	(810) 695-5166					Symbol Required on Memorial	:	Yes		No	Χ
Fax	(810) 695-0893					If yes, what symbol?				-	
Email	N/A					Benches Permitted:		Yes	Х	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 695- (810) 735-			Borders Required on Foundation	on:	Yes		No	Χ
			Ru	les & Regulat	tions - Installation	Fee					
FLUSH. S	SLANTS, BEVELS & MONU	JMENTS									
	,					SEXTON:					
FOUNDA	TION FEE:					Tim Hohn					
	150.00 MINIMUM					Genesee \		ılt			
, 4						810-695-5	5166				
Notes: "	OF FULL DUDING O DED OD	A)/= 4									
	OF FULL BURIALS PER GRA				5144 TION DED OD 4	\ -					
7	FOF CREMATION BURIALS	PER GRAVI	<u> :: 2 OR 1 F</u>	ULL AND 1 CR	EMATION PER GRA	N/E					
Inotalicti	on Eas Davidhle to	CACHICHE	:CV			Carina daliyan, bagina (data)	٠				
	_	CASH/CHE				Spring delivery begins (date):				
	E VALLEY VAULT	& CC VIA	PHONE			WEATHER PERMITTING					
10510 N.	HOLLY RD.					Fall/Winter Delivery "cutoff"	(date):				

WEATHER PERMITTING

BELLEVILLE (HILLSIDE CEMETERY)

BELLEVILLE, MI 48111

Address	46785 DENTON ROAD					Form Required: FORM	Yes	Χ	No	
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 697-9323 EXT 7010)				Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 697-6837					If yes, what symbol?			_	
Email	CLERK@BELLEVILLE.MI	<u>.US</u>				Benches Permitted:	Yes	Х	No	
Contact	BRIANA HOOTMAN	Phone	(734) 697 Ext. 7010			Borders Required on Foundation:	Yes	Х	No	
			R	ules & Regul	ations - Installatio	n Fee				
FLUSH, E	BEVELS, SLANTS AND MO	NUMENT	S							
30" MAX	FOR SINGLE									
FOUNDA	TION FEE: 1.00 PSI									
Cash, Che	eck and Credit Card in offic	е								
2019 last	fall foundation order on I	Friday, Au	gust 23rd							
Notes: #	OF FULL BURIALS PER	GRAVE 1	# OF CREI	MATION BUF	RIALS PER GRAVE	≣: 4				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	BELLEVILLE - ATTN: BRIA	NA HOOT	MAN			WEATHER PERMITTING Usually May	or Jun	е		
6 MAIN S	TREET					Fall/Winter Delivery "cutoff" (date):				

WEATHER PERMITTING

BETH EL MEMORIAL PARK

	00400 00414					- D : 1	.,	—]	.,		
	28120 SIX MILE					Form Required: FORM	Yes	No	X		
City	LIVONIA	State	MI	Zip	48152	Grave Location Required on Memorial:	Yes _	No	Х		
Phone Fax	(734) 421-5680 (734) 421-8997					Symbol Required on Memorial: If yes, what symbol?	Yes	No	Χ		
Email	sshukwit@elmcem.org					Benches Permitted:	Yes	No	Х		
Contact	STEVE SHUKWIT	Phone	(313) 653	-9361		Borders Required on Foundation:	Yes	No	Х		
			Ru	les & Regulat	ions - Installation	n Fee					
SINGLE	GRANITE FLUSH MARKEF	RS ONLY -	24"x 12"x 4	! "							
NO SYME	BOLS CONTRARY TO JEV	VISH RELI	GIOUS BEL	JEFS.							
INSTALL	ATION FEE: \$300.00				Cemetery will accept credit card payments with a 3% fee.						
						Debit cards are accepted with no fee	ls.				
						Accounting contact # 248-851-1100					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREI	MATION BUR	IALS PER GRAVE	:: 1					
					<u>_</u>						
Installati	on Fee Payable to:					Spring delivery begins (date):					
СЕМЕТЕ	RY BOARD OF CONGREC	GATION BE	TH EL			DELIVER ALL YEAR					
7400 TEL	EGRAPH RD.					Fall/Winter Delivery "cutoff" (date):					
BLOOMF	IELD HILLS, MI 48301					DELIVER ALL YEAR					

BETHLEHEM

									_			
Address	2801 JACKSON RD.					Form Required:	Yes		No	Х		
City	ANN ARBOR	State	MI	Zip	48103	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(734) 274-7422					Symbol Required on Memorial:	Yes		No	Х		
Fax						If yes, what symbol?			_			
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Х	No			
Contact	BRAD BOUCHIE	Phone	(734) 274	-7422		Borders Required on Foundation:	Yes		No	Χ		
			Pu	ulas & Ragula	ations - Installatio	n Fae						
DDONZE	FLUCIA ODANITE OLANI	TO DEVEL		_	itions - mstanatio	11 1 GG						
	, FLUSH GRANITE, SLAN	IS, BEVEL	S, AND MC	DNUMENTS								
	TION FEE:											
.65 PSI, N	/INIMUM \$200.00											
ALL DAGES FOR MONUMENTS MUST BE NO LONGER THAN OUT ON A SINGLE CRAYE												
ALL BASE	ALL BASES FOR MONUMENTS MUST BE NO LONGER THAN 34" ON A SINGLE GRAVE											
https://bos	hlehem-ucc.org/cemeterylo	acatoa aray	0/									
	•	<u>Juaileagrav</u>	<u>e/</u>									
Good for i	ooking up grave locations											
** ^	RKERS ARE SUBJECT TO) THE ADE			THE OFMETERY	(DOADD				ļ		
ALL IVIA	KKERS ARE SUBJECT TO	J THE APP	ROVAL OI	K DENIAL OF	· INE CEMETERY	BOARD.						
Notos: #	OF FULL BURIALS PER GRA	\\/E: 1										
			. 2 OD 4 EU	LL AND 4 CDE	MATION DED ODAN	/F						
#	OF CREMATION BURIALS P	ER GRAVE	. Z UK I FUI	LL AND I CRE	WATION PER GRAV	VE						
Installatio	on Fee Payable to: <u>CAS</u>	H CHECKS	S ONLY			Spring delivery begins (date):						
BRAD BC			<u> </u>			WEATHER PERMITTING						
	IOE ROAD					Fall/Winter Delivery "cutoff" (date):						
	, MI 49236					OCTOBER 1ST						

B'NAI ISRAEL MEMORIAL GARDEN

Address	43300 W. TWELVE MILE	/E MILE RD.				Form Required: FORM	Yes	X	No			
City	NOVI	State	MI	Zip	48377	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(248) 349-2784					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(248) 349-2826					If yes, what symbol?			1 1			
Email	mscharr@oaklandhillsmi.d	<u>com</u>				Benches Permitted: Call for restrictions	Yes	Χ				
Contact	MELISSA SCHARR	Phone	(248) 349	-2784		Borders Required on Foundation:	Yes	Χ	No			
MMG						**Call for regulations						
			Ru	les & Regulat	ions - Installation	Fee						
BRONZE	ONLY AND MUST BE MO	UNTED O	N A GRANI	TE BASE BEF	ORE DELIVERY T	O CEMETERY.						
ANY COL	OR OF GRANITE BASE IS	ALLOWE	D.									
BENCHE	S ARE ALLOWED.											
	FEES:											
	Flagging Fee:	\$175.00 F	Payable to 0	Dakland Hills M	Memorial Gardens							
	Setting Fee:	\$1.00 PS	l payable to	Inch Memoria	ls							
	Foundation Fee:	\$1.00 PS	l Payable to	Oakland Hills	Memorial Gardens	8						
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BUR	IALS PER GRAVE	:: 3						
Foundati	on Fee Payable to:					Spring delivery begins (date):						
OAKLANI	O HILLS MEMORIAL GARD		WEATHER PERMITTING									
(SAME ADDRESS AS ABOVE)						Fall/Winter Delivery "cutoff" (date):						
						WEATHER PERMITTING - CALL BY N	WEATHER PERMITTING - CALL BY NOV. 15TH					

BOTSFORD

CLINTON, MI 49236

									7	
Address	476 EARHART RD.					Form Required:	Yes		No	Χ
City	ANN ARBOR	State	MI	Zip	48105	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(734) 663-5018					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 663-2847					If yes, what symbol?			-	
Email	FORESTHILL_CEM@SB	CGLOBAL	.NET			Benches Permitted:	Yes	Х	No	
Contact	BRAD BOUCHIE	Phone	(734) 27	4-7422		Borders Required on Foundation:	Yes		No	Χ
			R	ules & Reg	ulations - Installation	on Fee				
EOUNDA.	TION FEE:									
	11NIMUM \$200.00									
•	FLUSH GRANITE, SLANT	ΓS, BEVEL	S, AND M	ONUMENTS	S					
	ES FOR MONUMENTS MU	•	·			VE				
MIN 4" TH	IICK GRANITE/MARBLE. /	ALL MEMC	RIALS M	UST COMPI	LY WITH THE CEM	ETERY APPEAL,				
NON TRA	DIONAL MONUMENTS W	ILL NEED	TO BE AF	PPROVED E	BEFORE PLACEME	NT.				
(THE CEN	METERY HAS A RIGHT TO	O REMOVE	OR NOT	T ACCEPT A	N UNDESIRED MO	NUMENT)				
•						,				
Notes: # (OF FULL BURIALS PER GRA	VE:1 # OF	E CREMAIN	NS PER GRA	VE: 2 OR 1 FULL AND) 1 CREMATION PER GRAVE				
110ιο3. π (OF TOLE BORNALOT ER GRA	(VL. 1 # OI	OKLIVIAII	NOT EN ONA	VE. 2 OK 11 OLE AND	O P GREWATION P EN GRAVE				
Installatio	on Fee Payable to:	CASH OR	CHECK (ONLY		Spring delivery begins (date):				
BRAD BC	UCHIE					WEATHER PERMITTING				
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				

OCTOBER 1ST

BRIGHTON HILLS

Address	1001 FLINT RD.					Form Required:	Yes	N	No	Χ		
City	BRIGHTON	State	MI	Zip	48116	Grave Location Required on Memorial:	Yes	\	No	Χ		
Phone	(810) 227-0463					Symbol Required on Memorial:	Yes	N	No	Χ		
Fax	(810) 227-6420					If yes, what symbol?						
Email	brownt@brightoncity.c	org				Benches Permitted Only with	Yes	ΧN	No [
Contact	TARA BROWN	Phone	(810) 227-0	0463		Sexton's Permission	-					
						Borders Required on Foundation:	Yes	ΧN	No			
			Rule	es & Regulati	ons - Installation	Fee						
2" BORD	ER REQUIRED FOR A	ALL MONUMEN	ITS, ELEVA	TED MARKER	RS, AND BRONZE	MARKERS (EXCEPT						
GOVERN	MENT). INSTALL FEE	FOR FOUNDA	TIONS NOT	Γ LISTED BEL	.OW = \$.40 PSI							
EXAMPLE	: A 36" x 12" MARKE	R OR MONUMI	ENT WILL N	NEED A 40"x 1	6" FOUNDATION	. THE COST WOULD						
BE \$153.	BE \$153. FOUNDATIONS ARE INSTALLED A MINIMUM OF 90 DAYS AFTER INTERNMENT.											
SECTION	SECTION 11 IS FLUSH ONLY. GOVERNMENT MARKER INSTALLATIONS - \$100.00											
	CONCRE	TE FOUNDATI	ON SIZES			NO CONCRETE FOUNDATION						
24"x 12" -	\$123.00 <i>Custom</i>	52"x 18" -	\$169.00			16"x 8" - \$75.00	REMAINS	AND				
28"x 16" -	(tnose no	30 X 10 -	\$177.00			_ · · · · _ • • • · · · · ·	OLUMBA					
36"x 16" -	\$150.00 found on the list), fee is \$		\$181.00			36"x 12" - \$95.00	LAQUES =	\$65.00				
40"x 16" -	Section 1		\$183.00			42"x 12", 48"x 12"- \$110.00						
42"x 16" -		72"x 18" -	\$190.00			54"x 12" - \$115.00						
42"x 18" -	\$160.00	80"x 20" -	\$198.00									
48"x 22" -	\$173.00	98"x 16" -	\$210.00									
Notes: # (OF FULL BURIALS PER	GRAVE: 1 # OF	CREMAINS	PER GRAVE: 2	OR 1 FULL AND 1	CREMATION PER GRAVE						
Installatio	on Fee Pavable to:					Spring delivery begins (date):						

Installation Fee Payable to:
CITY OF BRIGHTON
200 NORTH FIRST ST.
BRIGHTON, MI 48116

Spring delivery begins (date):
AT THE SEXTON'S DISCRETION
Fall/Winter Delivery "cutoff" (date):
AT THE SEXTON'S DISCRETION

BRIGHTON TOWNSHIP

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

								r		•			
Address						Form Required:		Yes		No	Χ		
City	BRIGHTON	State	MI	Zip		Grave Location Require	ed on Memorial:	Yes		No	Χ		
Phone	(248) 887-6700					Symbol Required on M	emorial:	Yes		No	Χ		
Fax	(248) 887-4487					If yes, what symbol?				_			
Email						Benches Permitted:	Call contact	Yes		No			
Contact	MIKE WILLENBERG @	Phone	248) 887 -	6700		Borders Required on F	oundation:	Yes	Χ	No			
НМС	HURON CEMETERY MAI	NTENANC	Æ			2" border on all sides							
			Ru	les & Regulations - Ins	stallation	Fee							
BRONZE,	FLUSH GRANITE, SLANT	S, AND M	ONUMENT	S - 30" MAX PER GRA	VE								
GOVERN	MENT ISSUED MARKERS	- ALL TYF	PES\$25	0.00									
FLUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)													
\$0.50 PSI	, MINIMUM \$175.00												
FOUNDA ^T	TION FEE FOR MONUMEN	NTS & BRO	ONZE ON C	CONCRETE (NON VA)									
\$0.70 PSI	OF FOUNDATION, MINIM	IUM \$250.0	00										
ALL FOU	NDATIONS MUST BE 2" LA	ARGER ON	N ALL SIDE	S THAN MONUMENT E	BASE.								
ADD 4" T0	O LENGTH AND WIDTH O	F BASE TO	O DETERM	INE FOUNDATION SIZ	ZE NEEDE	D.							
ADD \$50.	00 FOR BUILT IN VASE												
MISCELL	ANEOUS ITEMS												
CORNER	MARKERS (SET OF 4)	-\$125.00											
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FOR	R BUILT IN	I VASE)							
	otes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2												
(C	ALL MIKE @ HURON CEM	METERY M	AINTENAN	CE FIRST)									
				,									
Installatio	on Fee Payable to:	CASH, CH	HECK		ſ	Spring delivery begin	s (date):						

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

BROOKSIDE

Phone (517) 423-3632 Symbol Required on Memorial: Yes No X Fax N/A If yes, what symbol? Email troberts@tecumseh.mi.us Contact TRACEY ROBERTS Phone (517) 403-2239 Borders Required on Foundation: Yes X No 2" border on all sides Rules & Regulations - Installation Fee FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: 80 PSI - MINIMUM \$180.00 - PRE-POURS 24'x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. *BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Symbol Required on Memorial: Yes No X No										_		
Phone (517) 423-3632 Symbol Required on Memorial: Yes No X Fax N/A If yes, what symbol? Email troberts@tecumseh.mi.us Contact TRACEY ROBERTS Phone (517) 403-2239 Borders Required on Foundation: Yes X No Z** border on all sides Rules & Regulations - Installation Fee FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24"x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. **BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. **Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 **Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 **Symbol Required on Memorial: Yes No X No	Address	501 N. UNION ST.					Form Required:	Yes		No	Х	
Fax N/A	City	TECUMSEH	State	MI	Zip	49286	Grave Location Required on Memorial:	Yes		No	Х	
Email troberts@tecumseh.mi.us Benches Permitted: See note below Yes X No 2* border on all sides Rules & Regulations - Installation Fee FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24*x 12* NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. *BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. *Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 *Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 *Rules & Regulations - Installation Fee *Rules & Regulations - Installation Fee *Yes X No *X	Phone	• •					Symbol Required on Memorial:	Yes		No	Х	
Contact TRACEY ROBERTS Phone (517) 403-2239 Borders Required on Foundation: Yes X No 2" border on all sides Rules & Regulations - Installation Fee FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24"x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. "BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):	Fax						If yes, what symbol?			1		
Rules & Regulations - Installation Fee FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24"x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. * BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):	Email	troberts@tecumseh.mi.us					Benches Permitted: See note below	Yes	Х	No		
Rules & Regulations - Installation Fee FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24"x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. * BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):	Contact	TRACEY ROBERTS	Phone	(517) 403-	-2239		Borders Required on Foundation:	Yes	Х	No		
FLUSH, BEVELS, SLANTS, MONUMENTS FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24"x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. * BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):							2" border on all sides					
FOUNDATION FEE: .80 PSI - MINIMUM \$180.00 - PRE-POURS 24"x 12" NOTE: Foundation Fee calculation MUST include the 2" border on all sides in the foundation size. * BENCHES PERMITTED WITH PERMISSION & ACCESSABILITY NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):				Ru	les & Regulati	ions - Installatior	Fee					
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NOTE: If a grave has an existing marker or monument, additional outside benches are no longer allowed. Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):												
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Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2 Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):						honohoo ara na k	anger allowed					
Installation Fee Payable to: CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):	NOTE: II	a grave has an existing ma	rker or mor	nument, auc	ullional outside	benches are no i	onger allowed.					
Installation Fee Payable to: Cash & Checks CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):												
Installation Fee Payable to: CITY OF TECUMSEH P.O. BOX 396 Spring delivery begins (date): WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):		05 5111 BURING DED 6		" OF ODE		0 555 05 41/5						
CITY OF TECUMSEH P.O. BOX 396 WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):	Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CREI	MATION BURI	ALS PER GRAVE	: 2					
CITY OF TECUMSEH P.O. BOX 396 WEATHER PERMITTING Fall/Winter Delivery "cutoff" (date):	Installatio	on Fee Pavable to:	ash & Che	cks			Spring delivery begins (date):					
P.O. BOX 396 Fall/Winter Delivery "cutoff" (date):		-	acii a oile	0110								
							SEPTEMBER 20TH					

CADILLAC MEMORIAL - EAST

Cash, Check, and Credit Card VIA Phone

Address	38425 GARFIELD					Form Required: FORM	Yes	X	No	
City	CLINTON TWP	State	MI	Zip	48038	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 286-7500					Symbol Required on Memorial:	Yes		No	Х
Fax	(586) 286-5658					If yes, what symbol?				
Email						Benches Permitted:	Yes	Х	No	
Contact Park Lav	LARRY MARCATH & LIND/ (mark	A C. er desk)	Phone	. ,		Borders Required on Foundation:	Yes		No	Χ
			Ru	iles & Regulati	ions - Installatior	Fee				
BRONZE	ONLY. MUST BE ON G	RANITE BA	SE AND M	UST HAVE SA	WN SIDES, AND	CALCULATE THE				
FOUNDA	TION FEE ON THE SIZE	OF THE BA	SE. ANY	COLOR GRAN	ITE BRONZE BA	SE IS ALLOWED.				
	FEES:									
	Flagging Fee:									
	Setting Fee:									
	Foundation Fee:		\$1.00 PSI	Payable to Ca	dillac East					
BENCHE	S MUST HAVE GRANITE	BASE - \$75	50.00							
MEMORIA	AL REMOVAL FEE - \$75.0	00								
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREM	MATION BURIA	ALS PER GRAVE:	2 IF NO FULL BURIAL				
0	R 1 FULL AND 1 CREMA	INS PER G	RAVE							
Installatio	on Fee Payable to:		Spring delivery begins (date):							
CADILLA	C EAST CEMETERY					WEATHER PERMITTING				
(SAME ADDRESS AS ABOVE) Fall/Winter Delivery "cutoff" (date):										

NO CUTOFF (BUT WILL NOT BE SET UNTIL SPRING

CADILLAC MEMORIAL - WEST

Address	34224 FORD ROAD	24 FORD ROAD			Form Required: FORM	Yes	X	No							
City	WESTLAND	State	MI	Zip	48185	Grave Location Required on Memorial:	Yes		No	Х					
Phone	(734) 721-7161					Symbol Required on Memorial:	Yes		No	Х					
Fax	(734) 721-7740					If yes, what symbol?			_						
Email	mmcnamara@cadillacme	morialwest	t.com			Benches Permitted:	Yes	Х	No						
Contact MMG	MARY (MARKER DESK)	Phone	(734) 721	1-7161		Borders Required on Foundation:	Yes		No	Х					
			R	ules & Regula	tions - Installation	n Fee									
BRONZE	BRONZE ONLY. MUST BE ON GRANITE BASE AND MUST HAVE SAWN SIDES, AND CALCULATE THE														
FOUNDA	FOUNDATION FEE ON THE SIZE OF THE BASE. ANY COLOR GRANITE BRONZE BASE IS ALLOWED.														
	FEES:														
	Flagging Fee:		\$175.00	Payable to Cac	dillac West										
	Setting Fee:		\$1.00 PS	SI payable to Ind	ch Memorials										
	Foundation Fee:		\$1.00 PS	SI Payable to Ca	adillac West										
BENCHE	S MUST HAVE GRANITE I	BASE													
SECOND	RIGHTS (LOCATION MUS	ST BE APF	PROVED)												
Notes: # C	OF FULL BURIALS PER GRA	VE: 1 # OF	: CREMATIC	ON BURIALS PE	ER GRAVE: 2 (ONLY	/ IF NO FULL BODY)									
0	R 1 FULL AND 1 CREMATIO	NS PER GR	₹AVE												
															
Installation	on Fee Payable to:					Spring delivery begins (date):									
CADILLA	C WEST CEMETERY					WEATHER PERMITTING									
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):									
						NO CUTOFF									

CALVARY - KAWKAWLIN

Installation Fee Payable to:

(SAME ADDRESS AS ABOVE)

CALVARY CEMETERY

Address	2977 OLD KAWKAWLIN	I RD.				Form Required: FORM	<u>1</u>	Yes	Χ	No	
City	KAWKAWLIN	State	MI	Zip	48631	Grave Location Require	d on Memorial:	Yes	Χ	No	
Phone	(989) 684-0666					Symbol Required on M	emorial:	Yes	Χ	No	
Fax	(989) 684-8565					If yes, what symbol?	Religious	_			
Email						Benches Permitted:	See below	Yes	Χ	No	
Contact	CLERK IN OFFICE	Phone	(989) 684	-0666		Borders Required on F	oundation:	Yes		No	Х
			Ru	les & Regulati	ions - Installation	Fee					
BENCHES	S ARE NOT PERMITTED	IN FLUSH	SECTION.	MEMORIAL C	ONFIRMATION A	GREEMENT REQUIRE)				
FOR EAC	H PURCHASE. ALL GRA	AVES CAN I	BE MARKE	D WITH NO M	ORE THAN 3 MAI	RKERS. A MONUMENT	-				
OR FLUS	H MARKER ON ONE EN	O CENTER	ED OVER 3	OR MORE GF	RAVES COUNTS A	AS ONE MARKER FOR					
ALL THE	GRAVES IT IS CENTERE	D OVER.									
FLUSH F	OUNDATION FEE:										
24"x 12" C	OR SMALLER - \$275.00 (I	NCLUDES	FOUNDATI	ON)							
ALL FLUS	SH OVER 24"X 12" - \$475	.00									
MONUME	NT FOUNDATION FEES	<u>:</u>				MARKER ADMINIST	RATIVE FEE				
UP TO 32	" - \$450.00					FLUSH - \$200.00					
UP TO 48	" - \$675.00					32" - 60" - \$400.00					
UP TO 52	" - \$725.00					OVER 60" - \$600.00					
UP TO 60	" - \$840.00										
OVER 60"	- CUSTOM PRICE CALL	CEMETER	Υ								
Notes: # 0	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAINS	PER GRAVE: 2	OR 1 FULL AND	1 CREMATION PER GRAV	/E				

Spring delivery begins (date):

OCTOBOER 1ST

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING (IF FOUNDATION IS IN)

<u>CAPAC</u>

Address	EXIT 176 ON EAST SIDE	OF CAPA	C RD.			Form Required:	Yes		No	Х
City	CAPAC	State	MI	Zip	48014	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 395-7543					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 395-7182					If yes, what symbol?				
Email	admin@musseytownship.	org				Benches Permitted:	Yes	Х	No	
	JERRY PEWINSKI	Phone	(810) 614			Borders Required on Foundation:	Yes	Х	No	
or MUSSI	EY TWP - Ph: (810) 395-4	915 Fx: (8	10) 395-71	182		2" border all around (Included in size &	& charg	ed for)		
			R	ules & Regulat	ions - Installation	Fee				
CALL TO	WNSHIP FOR REGULATION	ONS & SIZ	ES ALLOV	VED.						
FOUNDAT	ΓΙΟΝ FEE: .55 PSI.									
JERRY PE	EWINSKI (SEXTON)									
Notes: #	OF FULL BURIALS PER O	SRAVE: 1	# OF CRE	EMATION BURI	IALS PER GRAVE:	2				
	R 1 FULL AND 1 CREMAT									
										ı
Installatio	on Fee Payable to:					Spring delivery begins (date):				
JERRY PE	-					MAY 1ST				
8051 ALM	ONT RD.					Fall/Winter Delivery "cutoff" (date):				
ALMONT,	MI 48003					DECEMBER 1ST				

CHAPEL HILL MEMORIAL GARDENS

Address	4444 WEST GRAND RIV	ER				Form Required:	Yes		No	Х
City	LANSING	State	MI	Zip	48906	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(517) 321-3000 (517) 321-4673					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х
Email						Benches Permitted:	Yes	Х	No	
Contact	TREVOR MARQUARDT	Phone	(517) 321-	3000		Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulation	ons - Installation	Fee				
BRONZE	ON GRANITE ONLY. VA	SES ALLO	WED. CAL	L FOR SPECII	FIC SIZING.					
NO FLUS	H, BEVELS OR SLANTS A	LLOWED.	UPRIGHT	MONUMENT	SECTION.					
INFANT 1	0 x 20 ON 14 x 24 x 4 BAS	SE = \$99.00)							
31" AND E	BELOW = \$899.00									
32" AND (JP = \$1,599.00									
38" MAX I	FOR SINGLE GRAVE									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMATIC	N BURIALS PE	ER GRAVE: 2					
	OR 1 FULL AND 1 CREMATION	ON PER GR	AVE (CALL F	OR PRIOR APP	PROVAL)					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CHAPEL	HILL MEMORIAL PARK					WEATHER PERMITTING				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

CHAPEL OF MEMORIAL GARDENS / METROPOLITAN MEMORIAL GARDENS

Address	48300 WILLOW ROAD					Form Required:	Yes	No	Х
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes	No	Х
Phone Fax	(734) 461-1118 OR 1119 N/A					Symbol Required on Memorial: If yes, what symbol?	Yes	No	Х
Email	jhinkle1@wowway.com					Benches Permitted:	Yes	No	Χ
Contact	JACKSON HINKLE	Phone	(734) 461	-1118		Borders Required on Foundation:	Yes	No	Х
		O	r (734) 461	-1119				_	-
			Ru	les & Regulati	ons - Installation	Fee			
BRONZE	AND FLUSH GRANITE MA	ARKERS C	NLY. NO U	PRIGHTS, VA	SES OR BENCHE	S ALLOWED.			
BRONZE	MARKERS MUST HAVE G	RANITE E	BASE BEFC	RE INSTALLA	TION. ANY COLO	OR GRANITE BRONZE			
BASE ALI	OWED. WAIVER MUST I	BE SIGNEI	D FOR ANY	BRONZE MA	RKER.				
SINGLE N	MARKER - ONLY 1 NAME	ALLOWED	. PHOTOS	ETCHED ON	MARKER ONLY.				
NO FULL	LEDGERS ALLOWED. NO	UPRIGHT	ΓS, VASES	OR BENCHES	S ALLOWED.				
NO VASE	S ALLOWED.								
FOUNDA [*]	TION FEE:								
INFANT N	MARKER UP TO 20"x 10" x	4" - \$385.	00						
24"x 12" x	4" - \$410.00 - NO TWO N	AMES ON	SINGLE M	ARKERS - 2 M	ARKERS ON 1 G	RAVE ALLOWED			
ADULT M	ARKERS FOR ALL SIZES	AFTER 24	"x 12" x 4"	- \$1.50 PSI					
ALL SIZE	S after 24"x 12" x 4" - \$1.50) PSI							
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OI	- CREMATIC	ON BURIALS PE	R GRAVE: 1				
(OR 1 FULL AND 1 CREMATIC	N PER GR	AVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):			
Metropolit	an Memorial Gardens					WEATHER PERMITTING			
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):			
						WEATHER PERMITTING			

CHERRY HILL

City State: CARELTON, MI 48117-9150

										7	
Address	RIDGE ROAD S. AT CH	HERRY HILI	L ROAD				Form Required:	Yes		No	Х
City	CANTON	State	MI	Zip	48187		**Grave Location Required on Memo	orial Yes		No	Х
Contact	ROBERT SIMMONS - F	President of	CHS Asso	oc.			Symbol Required on Memorial:	Yes		No	Х
Phone	(313) 562-7496						If yes, what symbol?				
Email	fairygarden@att.net						Benches Permitted:	Yes	Х	No	
Contact			(734) 9	81-3799			Borders Required on Foundation:	Yes	Х	No	
	SEXTON: KYLE PRICI	E - Phone	(734) 3	01-1141			2" border all around marke	r require	d		
			ı	Rules & Reg	gulations - Ins	stallation	Fee				
NOTHING	OVER 5' HIGH.										
FOUNDA	TION FEE: .65 PSI										
**GRA\/F	LOCATION ON MEMOR	NAL SOME	TIMES HE	I PS							
OKAVE	LOOK HOW ON WILWO	TIAL OOME	I IIVILO I IL	-Li O.							
Notos: #	OF FULL BURIALS PER	CDAVE: 1	# OF CE	DEMATION I	DIIDINI C DEE	CDAVE.	1				
NOICS. #	OI I OLL BUNIALS PER	GRAVE. I	# OF CF	XLIVIA I ION I	DOINIALO PER	N GRAVE.	1				
Installation	on Fee Payable to:	Method	of payme	ents			Spring delivery begins (date):				
	KYLE PRICE		ck Credit Ca				WEATHER PERMITTING				
1	6480 OAKVILLE-WALT						Fall/Winter Delivery "cutoff" (date)):			

WEATHER PERMITTING

CHRISTIAN MEMORIAL

Address	521 E. HAMLIN					Form Required: FORM	Yes	X	No	
City	ROCHESTER HILLS	State	MI	Zip	48307	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(248) 651-8192 (248) 651-3169					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х
Email						Benches Permitted:	Yes	Х	No	
Contact	LISA McINTYRE	Phone	(248) 6	651-8192		Borders Required on Foundation:	Yes	Х	No	
						2"border required		·		
				Rules & Reg	julations - Installa	ition Fee				
FLAT BR	ONZE ONLY. REGULAR	VASES AL	LOWED	. ALL MARKE	ERS MUST BE MC	DUNTED ON 4" THICK				
GRANITE	. ANY COLOR GRANITI	BRONZE	BASES /	ALLOWED.						
FOUNDA	TION FEE:									
\$799.00	SINGLE BRONZE ON SIN	IGLE GRAN	NTE							
\$1,199.00) SINGLE BRONZE ON C	OMPANIO	N GRANI	ITE, OR COM	IPANION BRONZE	ON COMPANION GRANITE				
REMOVE	AND RESET MARKER -	\$200.00								
SINGLE 2	24"x 14"									
DOUBLE	44"x 14"									
LAWNCR	YPT 16"x 24"									
2 VA ON	28"x 30" OR 54"x 16" OR	60"x 16" G	RANITE	BASE						
VA OR M	ATCH VA ONLY 24"x 12"									
ı										
ı										
Notes: #	OF BURIALS PER GRAV	/E: 2 # OF	CREMA	TION BURIA	LS PER GRAVE: 2	2				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CHRISTIA	AN MEMORIAL					APRIL 1ST				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						NOVEMBER 1ST				

CLINTON GROVE

Address	21189 CASS AVENUE					Form Required:	Yes		No	Х
City	CLINTON TWP.	State	MI	Zip	48036	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 463-0851					Symbol Required on Memorial:	Yes		No	Χ
Fax	(586) 463-0931					If yes, what symbol?			1	
Email	sales@clintongrove.com					Benches Permitted: Call for restrictions	Yes	Х	No	
Contact	DAN STOKES TINA WUNDERLICH (Invo	Phone picing)	(586) 463-0	0851		Borders Required on Foundation:	Yes		No	Х
			Rule	es & Regulati	ons - Installation	Fee				
MONUME	NTS ARE ALLOWED ON 4	4 GRAVE L	OTS. NEW	/ VETERANS	SECTION HAS A	MERICAN MARBLE				
TABLETS										
FOUNDA [*]	TION FEE:									
16"x 10" (BABY & CREMAINS) - \$20	0.00								
24"X 12" -	\$325.00									
32" TO 48	3"x 12" - \$525.00									
48" TO 60	" - \$675.00									
LARGER	THAN 60" IS CUSTOM. PL	EASE CAL	L CLINTON	I GROVE CEN	METERY FOR PR	ICE.				
LEDGER	- \$850.00									
Notes: 1 F	FULL BURIAL PER GRAVE O	R 1 FULL A	ND 2 CREMA	ATION BURIALS	S PER GRAVE					
Installatio	on Fee Payable to:	Cash, Che	ck, &			Spring delivery begins (date):				
CLINTON	GROVE CEMETERY C	redit Card	VIA Phone			WEATHER PERMITTING				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

CLOVER HILL PARK

Address	2425 E. FOURTEEN MILE	RD.				Form Required: FORM	Yes	Х	No	
City	BIRMINGHAM	State	MI	Zip	48009	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 723-8884					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 723-8886					If yes, what symbol?			_	
Email	kraznik@cloverhillpark.org	1				Benches Permitted:	Yes	Х	No	
Contact	KIMBERLY RAZNIK	Phone	(248) 723-	8884		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulati	ons - Installation	Fee				
MONUME	NTS MUST HAVE (FAMIL	Y NAME O	NLY ON F	RONT.) NAME	PERMITTED ON	BACK FOR 4+ FAMILY LOTS				
PERMIT F	REQUIRED FOR DELIVER	<mark>Y. FOUND</mark>	ATION FEI	E: (TAX ON FO	OUNDATIONS) + I	PERMIT FEES				
PERMIT F	FEE ON <u>ALL ORDERS</u> - \$5	0.00								
SECTION	9 AND FIRST 3 ROWS SE	ECTION 30	IS BRONZ	E ONLY up to	Lot 35					
						MONUMENT CLEANING FEES:				
GRANITE	MARKERS - \$450.00 + \$5	0.00 = \$50	0.00			FOOTSTONE/BEVEL	\$200.0	00		
BRONZE	MARKERS - \$450.00 + \$50	0.00 = \$50 0	0.00			SINGLE SLANT	\$250.0	00		
BENCHES	S: BENCH 48"x 14" - \$1,5	00.00 + \$5	0.00 = \$1,5	50.00		MONUMENTS - CALL FOR QUOT	E			
BABY - 8"	x 10" or 12", 10"x 16" - \$85	.00 + \$50.0	00 = \$135.0	0						
MONUME	NTS: \$1,500.00 + \$50.00	= \$1,550.0	0							
FOUNDA ⁻	ΓΙΟΝ REMOVAL - \$200.00	FOR MAR	KER / \$450	0.00 FOR MON	IUMENT					
HEADSTO	ONE LEVELING - \$250.00									
MONUME	NT LEVELING - CALL CLO	OVER HILL	FOR PRIC	CING						
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CREI	MATION BURI	ALS PER GRAVE	: 1				

Installation Fee Payable to: <u>CASH, CHECK</u>

CLOVER HILL PARK CEMETERY CREDIT CARDS

(SAME ADDRESS AS ABOVE)

Spring delivery begins (date):

WEATHER PERMITTING (APPROX. APRIL 1ST)

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING (APPROX. DEC. 1ST)

COMMERCE CEMETERY

P.O. BOX 112

HIGHLAND, MI 48357

Address	N. & S. SIDE OF COMME	ERCE RD.			Fo	orm Required:		Yes		No	Х
City	COMMERCE	State	MI	Zip	Gı	rave Location Requ	red on Memorial:	Yes		No	Х
Phone	(248) 887-6700				Sy	mbol Required on I	Memorial:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?				-	
Email					Ве	enches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG		e (248) 887-	6700	Во	orders Required on	Foundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANC	CE			2" borde	er on all sides				
			Ru	les & Regulations - Ins	stallation Fe	e					
BRONZE	, FLUSH GRANITE, SLAN	TS, AND M	IONUMENT	S - 36" MAX PER GRA	VE						
GOVERN	MENT ISSUED MARKERS	<u> 3 - ALL TYF</u>	PES\$25	0.00							
FLUSH S	JSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)										
\$0.50 PS	50 PSI, MINIMUM \$175.00										
FOUNDA	TION FEE FOR MONUME	NTS & BR	ONZE ON C	ONCRETE (NON VA)							
\$0.70 PS	OF FOUNDATION, MININ	лUM \$250.	00								
ALL FOU	NDATIONS MUST BE 2" L	.ARGER OI	N ALL SIDE	S THAN MONUMENT E	BASE.						
ADD 4" T	O LENGTH AND WIDTH C	OF BASE T	O DETERM	INE FOUNDATION SIZ	ZE NEEDED.						
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	ILY	\$100.00	(ADD \$50.	00 FOR ALL FEES FOR	R BUILT IN V	/ASE)					
Notes: #	otes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2										
(C	ALL MIKE @ HURON CEN	METERY N	<u>IAINTEN</u> AN	CE FIRST)							
Installation	on Fee Payable to:	CASH, CH	HECK		Sp	oring delivery begi	ns (date):				
HURON (JRON CEMETERY MAINTENANCE CC VIA PHONE WEATHER PERMITTING										

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

COMMERCE MEMORIAL CEMETERY

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

									-	
Address	2451 BENSTEIN ROAD				Form Required:		Yes	<u> </u>	No	Χ
City	COMMERCE	State	MI	Zip	Grave Location Requi	ired on Memorial:	Yes	<u> </u>	No	Χ
Phone	(248) 887-6700				Symbol Required on I	Memorial:	Yes		No	Х
Fax	(248) 887-4487				If yes, what symbol?				_	
Email					Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG	Phone	(248) 887-	6700	Borders Required on	Foundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANC	E		2" borde	er on all sides				
			Ru	les & Regulations - Ins	stallation Fee					
BRONZE,	FLUSH GRANITE, SLAN	ΓS, AND M	ONUMENT	S - 36" MAX PER GRA	VE					
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	0.00						
FLUSH SE	ETTING OF GRANITE & B	RONZE O	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BRO	ONZE ON C	ONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	1UM \$250.0	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT E	BASE.					
ADD 4" TO	D LENGTH AND WIDTH C	F BASE TO	O DETERM	INE FOUNDATION SIZ	E NEEDED.					
ADD \$50.0	00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
CORNER	MARKERS (SET OF 4)	\$125.00								
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FOR	R BUILT IN VASE)					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREM	MATION BURIALS PER	GRAVE: 2					
(C	ALL MIKE @ HURON CEN	ИETERY М	AINTENAN	CE FIRST)						
Installatio	on Fee Pavable to:	CASH CH	IECK		Spring delivery begi	ne (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

CRESCENT HILLS

WATERFORD TOWNSHIP

(SAME ADDRESS AS ABOVE)

Address	5240 CIVIC CENTER DR.					Form Required:	Yes		No	Х
City	WATERFORD TWP	State	MI	Zip	48329	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 618-7437					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 674-8658					If yes, what symbol?			-	
Email	mbellehumeur@waterford	mi.gov				Benches Permitted:	Yes	Х	No	
Contact	MARY BELLEHUMEUR	Phone	(248) 618-	-7437		Borders Required on Foundation:	Yes		No	Х
DPW	BRETT THOMPSON: 248	-639-8450								
			Ru	les & Regulat	ions - Installatior	Fee				
FLUSH, G	RANITE, BEVELS, SLANT	S AND MO	DNUMENTS	S. SINGLE G	RAVE IS <mark>TO BE N</mark>	O LARGER THAN 30".				
SECTION	A - MEMORIALS WILL BE	BACK TO	BACK.			MAXIMUM COMPANION IS 48".				
NO ENGF	RAVING ON BACK SIDE.									
FOUNDA	TION FEE: 1.00 PSI - MIN	IMUM \$28	8.00							
24"x 12" -	\$288.00	46"x 12" -	\$552.00							
30"x 12" -	\$360.00	48"x 12" -	\$576.00							
36"x 12" -	\$432.00	52"x 12" -	\$624.00							
42"x 12" -	\$504.00	46"x 14" -	\$644.00							
48"x 12" -	\$576.00	52"x 14" -	\$728.00							
VETERAN	N FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED E	BY A REPRESI	ENTATIVE FROM	THE				
FAMILY A	ND SEXTON (BRETT THO	OMPSON 2	248-639-845	50).						
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 4	OR 1 FULL AND	1 CREMATION PER GRAVE				
				_						
Installatio	on Fee Payable to: Checks	s and Casl	h			Spring delivery begins (date):				

WEATHER PERMITTING (PLEASE CALL FIRST)

WEATHER PERMITTING (PLEASE CALL FIRST)

Fall/Winter Delivery "cutoff" (date):

CRESTWOOD MEMORIAL

Δddraee	2020 EAST HILL ROAD					Form Required:	Yes		No	Х
City	GRAND BLANC	State	MI	Zip	48439	Grave Location Required on Memorial:			No	X
•		State	IVII	ΖΙΡ	40439	•			1	
Phone Fax	(810) 694-4101 (810) 694-9481					Symbol Required on Memorial:	Yes		No	Х
	,	on, com				If yes, what symbol?			1 1	
Email	cfirman@covenantcemete	<u>ary.com</u>				Benches Permitted: Designated areas	Yes	Х	No	
Contact	CATHY FIRMAN	Phone	(810) 694	-4101		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulat	ions - Installation	Fee				
NO BEVE	LS OR SLANTS ALLOWE	D. GRANI	TE MUST E	3E FLUSH ANI	D SAWN SIDES.					
MINIMUM	I SIZE 24"x 14" WITH FLO	WER VAS	E, CENTER	RED 1-1/2" FR(OM TOP CENTER					
	TION FEE:									
	ER LINEAR INCH									
,										
 MONLIME	ENTS IN DESIGNATED AR	PEAS ONLY	√							
INIOINIL	INTO IN DEGICIONALED AN	LAO OINE								
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OF	F CREMATIC	ON BURIALS PE	ER GRAVE: 2					
	OR 1 FULL AND 1 CREMATION	ON PER GR	AV <u>E</u>							
Installation	on Fee Payable to: Check	s and Cas	h			Spring delivery begins (date):				
CRESTW	OOD MEMORIAL CEMET	ERY				WEATHER PERMITTING				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

DAVIS

Address	ROMEO PLANK AND 27	MILE RD.				Form Required:	Yes		No	Χ
City	RAY	State	MI	Zip	48096	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 381-3813					Symbol Required on Memorial:	Yes		No	Х
Fax	N/A					If yes, what symbol?			_	
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	TONY SCHOENHER	Phone	(586) 381	-3813		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulat	ions - Installation	Fee				
BRONZE,	FLUSH GRANITE, BEVEL	_S, SLANT	S AND MO	NUMENTS.						
FOUNDA	TION FEE: .55 PSI - \$125.	00 MINIMU	JM.							
BASES N	O WIDER THAN 14". MAX	IMUM LEN	IGTH IS 48	".						
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OI	- CREMATIC	ON BURIALS PE	ER GRAVE: 1					
	OR 1 FULL AND 1 CREMATION	ON PER GR	AVE							
Installatio	on Fee Payable to:					Spring delivery begins (date):				
TONY SC	HOENHER					WEATHER PERMITTING				
59074 RC	MEO PLANK RD.					Fall/Winter Delivery "cutoff" (date):				
RAY, MI 4	8096					WEATHER PERMITTING				

<u>DAVISBURG</u>

									_		
Address	DAVISBURG RD. JUST V	WEST OF	DILLEY R	OAD		Form Required:	Yes		No	Х	
City	DAVISBURG	State	MI	Zip	48350	Grave Location Required on Memorial:	Yes		No	Х	
Phone	(810) 695-5166					Symbol Required on Memorial:	Yes		No	Х	
Fax	(810) 695-0893					If yes, what symbol?			-		
Email	N/A					Benches Permitted:	Yes	Х	No		
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 69 (810) 73			Borders Required on Foundation:	Yes		No	Х	
			R	Rules & Re	gulations - Installation	n Fee					
FLUSH, SLANTS, BEVELS & MONUMENTS											
FOUNDA	TION FEE:										
.50 PSI, \$	150.00 MINIMUM										
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # C	F CREMAT	ΓΙΟΝ BURIA	LS PER GRAVE: 2						
(OR 1 FULL AND 1 CREMATION	ON PER GF	RAVE								
Installatio	on Fee Payable to: Cash ,	Check, C	Spring delivery begins (date):								
GENESE	E VALLEY VAULT VIA	PHONE	WEATHER PERMITTING								
10510 N.	HOLLY RD.		Fall/Winter Delivery "cutoff" (date):								
HOLLY, N	/II 48442		WEATHER PERMITTING								

DAVISON

Address	10080 E. POTTER ROAD)				Form Required:	Yes		No	Х		
City	DAVISON	State	MI	Zip	48423	Grave Location Required on Memorial:	Yes		No	Х		
Phone Fax	(810) 845-5982 N/A					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ		
Email	debbiekolbe@aol.com					Benches Permitted:	Yes	Х	No			
Contact	DEBBIE KOLBE (SEXTON)	Phone	(810) 845	-5982		Borders Required on Foundation:	Yes		No	Х		
Rules & Regulations - Installation Fee												
BRONZE, FLUSH GRANITE, BEVELS, SLANTS AND MONUMENTS.												
FOUNDATION FEE: .90 PSI												
Notes: #	OF FULL BURIALS PER GRA	AVE: 1										
#	OF CREMATION BURIALS P	ER GRAVE	:: 2 OR 1 FU	LL AND 1 CRE	MATION PER GRAV	/E						
Installation Fee Payable to:						Spring delivery begins (date):		_				
DAVISON TOWNSHIP - ATTN: DEBBIE KOLBE						MAY 1ST OR WEATHER PERMITTING						
10207 E. RICHFIELD						Fall/Winter Delivery "cutoff" (date):						
DAVISON, MI 48423						OCTOBER 1ST						

DEERFIELD

										1			
Address	OTTER LAKE RD 3/4 N	ЛILE W. OF	F M-24				Form Required:	Yes		No	X		
City	FOSTORIA	State	MI	Zip	48435		Grave Location Required on Memorial:	Yes		No	Х		
Phone	(810) 793-6700						Symbol Required on Memorial:	Yes		No	Χ		
Fax	(810) 793-4077						If yes, what symbol?						
Email	clerk@deerfieldtownship.	<u>com</u>					Benches Permitted:	Yes	Х	No			
Contact		Phone	(810) 7	793-6700			Borders Required on Foundation:	Yes	Х	No			
							2"- 3" border required						
Rules & Regulations - Installation Fee													
FOUNDATION FEE:													
.17 PSI ADD 8" TO BOTH LENGTH AND WIDTH MEASUREMENTS OF THE ACTUAL STONE.													
EXAMPLE: 24"x 12"x 4" MEASURE AS 32"x 20"													
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2													
OR 1 FULL AND 1 CREMATION PER GRAVE													
					1								
	on Fee Payable to:						Spring delivery begins (date):						
	LD TOWNSHIP						WEATHER PERMITTING						
30 EAST	BURNSIDE						Fall/Winter Delivery "cutoff" (date):						
NORTH E	RANCH, MI 48461						WEATHER PERMITTING						

DEERFIELD & SHARP

									_	
Address	MACK RD.					Form Required:	Yes		No	Χ
City	DEERFIELD TWP.	State	MI	Zip	49238	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 546-0787					Symbol Required on Memorial:	Yes		No	Х
Fax	N/A					If yes, what symbol?			_	
Email	tugboat51@earthlink.net					Benches Permitted:	Yes	Х	No	
Contact	DENNIS GRAHAM	Phone	(517) 54	6-0787		Borders Required on Foundation:	Yes	Х	No	
						2" border required for above grou	nd mar	rkers		
			R	ules & Regul	ations - Installat	ion Fee				
FLUSH, E	BRONZE, BEVELS, SLANT	S, MONUN	MENTS							
FOUNDA	TION FEE:									
24"x 12" -	\$120.00									
36"x 12" -	\$160.00									
48"x 12" -	\$220.00									
Notos: #	OF FULL BURIALS PER GRA	۸\/E:1 # O	E CDEMAT	TON BUIDINI C		70.6				
Notes. #					FER GRAVE. OF I					
	OR 1 FULL AND 6 CREMATI	ION BURIA	LS PER Gr	KAVE						
Installati	on Fee Payable to:					Spring delivery begins (date):				
DENNIS	GRAHAM					WEATHER PERMITTING				
1985 GAI	NNON					Fall/Winter Delivery "cutoff" (date):				
HOWELL	., MI 48843					WEATHER PERMITTING				

DENTON

Address	49780 CROSS ST.					Form Required:	Yes		No	Χ
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes	I	No	Χ
Phone	(734) 699-8900 ext 6					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 699-5213					If yes, what symbol?			i	
Email	bbeaudry@vanburen-mi.c	org				Benches Permitted:	Yes		No	Χ
Contact	BRITTANY BEAUDRY	Phone	(734) 699	-8909		Borders Required on Foundation:	Yes		No	Χ
				_	ions - Installation					
CHARTE	R TOWNSHIP OF VAN BU	IREN, KIRI	K, CHUCK (OR SAM, TO S	TAKE GRAVE. T	HE FAMILY IS				
RESPON	SIBLE FOR FOUNDATION	I/INSTALL	ATION. NO	SUNDAY OR	HOLIDAY BURIA	LS.				
INCH TO	INSTALL FOUNDATIONS	: \$1.00 PS								
FOUNDA	TION FEE: \$50.00 (MARK	ING AND I	NSPECTIO	N)						
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payable to: Check	s Only				Spring delivery begins (date):				
CHARTE	R TOWNSHIP OF VAN BU	IREN				APRIL 1ST				
46425 TY	LER ROAD					Fall/Winter Delivery "cutoff" (date):				
BELLEVIL	LE, MI 48111					NOVEMBER 30TH				

DETROIT MEMORIAL PARK - EAST

Address	4280 E. 13 MILE ROAD					Form Required: FORM	Yes	X	No	
City	WARREN	State	MI	Zip	48092	Grave Location Required on Memorial:	Yes	Х	No	
Phone Fax	(586) 751-1313 (586) 751-1866					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ
Email	cmaddox@detroitmemoria	alpark com				Benches Permitted:	— Yes	Х	No	
	CAROL MADDOX	•	(EQC) 7E1	1010					No	X
Contact	CAROL MADDOX	Phone	(586) 751-	1313		Borders Required on Foundation:	Yes		IIIO	
			Rul	es & Regulati	ions - Installation	Fee				
ALL BRO	NZE MUST BE MOUNTED	ON GRAN	ITE BEFOR	RE DELIVERY	TO CEMETERY.	2 NAMES ON A SINGLE				
MARKER	NOT ACCEPTED. FOUND	DATION FE	EE MUST A	CCOMPANY I	DELIVERY WITH I	MARKER.				
FLUSH M	ARKERS (SAWN SIDES C	NLY ON G	RANITE MA	ARKERS). BR	RONZE OR GRAN	ITE.				
FOUNDA	TION FEE:									
FLUSH M	ARKERS, BRONZE OR G	RANITE - \$	1.15 PSI							
MONUME	NTS AND BENCHES - \$1.	30 PSI, MI	NIMUM OF	\$175.00. BEN	NCHES REQUIRE	GRANITE BASE.				
16"x 8"										
24"x 12"										
24"x 14"										
48"x 12"										
LAWN CF	RYPT 16"x 24"									
Notes: #	OF FULL BURIALS PER G	SRAVE: 2 :	# OF CREM	IATION BURIA	ALS PER GRAVE:	2				
	1 FULL AND 1 CREMATION				LOT EN ORTONE.	_				
	TI OLL AND TOKEMATK	ON (AT TIE	AD) I ER O	TOTAL CONTRACTOR OF THE PARTY O						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
DETROIT	MEMORIAL PARK CEME	TERY				APRIL 15TH				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						NOVEMBER 15TH				

<u>DETROIT MEMORIAL PARK - WEST</u>

Address	25200 PLYMOUTH RD.					Form Required: FORM	Yes	Χ	No	
City	REDFORD	State	MI	Zip	48239	Grave Location Required on Memorial:	Yes	Х	No	
Phone	(313) 533-1302					Symbol Required on Memorial:	Yes		No	Χ
Fax	(313) 533-4942					If yes, what symbol?				
Email	gbell@detroitmemorialpa	rk.com	myoung@	<u>@detroitmemo</u>	rialpark.com	Benches Permitted:	Yes	Х	No	
Contact	Giavanni or Dominique	Phone				Borders Required on Foundation:	Yes		No	Χ
			R	ules & Regula	ations - Installation	n Fee				
ALL BRO	NZE MUST BE MOUNTED	ON GRAN	NITE BEFO	ORE DELIVER	Y TO CEMETERY.	2 NAMES ON A SINGLE				
MARKER	NOT ACCEPTED. FOUN	DATION F	EE MUST	ACCOMPANY	DELIVERY WITH	MARKER.				
FLUSH M	ARKERS (SAWN SIDES (ONLY ON C	RANITE I	MARKERS). E	BRONZE OR GRAN	IITE.				
FOUNDA	TION FEE:									
FLUSH M	ARKERS, BRONZE OR G	RANITE - 9	31.15 PSI							
MONUME	NTS AND BENCHES - \$1	.30 PSI, MI	NIMUM O	F \$175.00. BE	ENCHES REQUIRE	GRANITE BASE.				
16"x 8"										
24"x 12"										
24"x 14"										
48"x 12"										
LAWN CF	RYPT 16"x 24"									
Notes: #	OF FULL BURIALS PER (GRAVE: 2	# OF CRE	MATION BUR	IALS PER GRAVE	: 2				
OR	1 FULL AND 1 CREMATI	ON (AT HE	AD) PER	GRAVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
DETROIT	MEMORIAL PARK CEME	TERY				APRIL 15TH				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				

NOVEMBER 15TH

DRAYTON PLAINS

Installation Fee Payable to:

WATERFORD TOWNSHIP 5240 CIVIC CENTER DR.

WATERFORD, MI 48329

Cash and Checks

Address	DIXIE HWY & WILLIAMS	LAKE RD				Form Required:	Yes		No	Х
City	WATERFORD	State	MI	Zip	48329	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 618-7437					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 674-8658					If yes, what symbol?			ī	
Email	mbellehumeur@waterford	mi.gov				Benches Permitted:	Yes	Х	No	
Contact DPW	MARY BELLEHUMEUR BRETT THOMPSON: 248		(248) 618-	7437		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulati	ons - Installation	Fee				
FLUSH, G	RANITE, BEVELS, SLANT	S AND MC	NUMENTS	S. SINGLE GR	RAVE IS <mark> TO BE N</mark>	O LARGER THAN 30".				
SECTION	A - MEMORIALS WILL BE	BACK TO	BACK.			MAXIMUM COMPANION IS 48".				
NO ENGR	AVING ON BACK SIDE.									
1										
FOUNDA [*]	ΓΙΟΝ FEE: 1.00 PSI - MIN	IMUM \$288	3.00							
24"x 12" -	\$288.00	46"x 12" -	\$552.00							
30"x 12" -	\$360.00	48"x 12" -	\$576.00							
36"x 12" -	\$432.00	52"x 12" -	\$624.00							
42"x 12" -	\$504.00	46"x 14" -	\$644.00							
48"x 12" -	\$576.00	52"x 14" -	\$728.00							
VETERAN	FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED B	Y A REPRESE	ENTATIVE FROM	THE				
FAMILY A	ND SEXTON (BRETT THO	MPSON 2	48-639-845	60).						
Notes: # 0	F FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 4	OR 1 FULL AND	CREMATION PER GRAVE				
_										

Spring delivery begins (date):

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING (PLEASE CALL FIRST)

WEATHER PERMITTING (PLEASE CALL FIRST)

<u>DRYDEN</u>

Address	MULHOLLAND ROAD					Form Required:	Yes		No	Х
City	DRYDEN	State	MI	Zip	48428	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(810) 796-2291 (810) 796-3618					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ
Email	drydenvillagetreasurer@a	niradv.net				Benches Permitted: <i>Prior approval</i>	Yes	Χ	No	
Contact	RANDE LISTERMAN OR JAMES HONNOLD - SEX		(810) 79 (10) 796-2			Borders Required on Foundation:	Yes		No	
			F	Rules & Reg	julations - Installatio	n Fee				
FOUNDA	TION FEE: .30 PSI									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMA	INS PER GR	AVE: 1 OR 1 FULL AND) 1 CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
VILLAGE	OF DRYDEN					WEATHER PERMITTING				
P.O. BOX	329					Fall/Winter Delivery "cutoff" (date):				
DRYDEN	, MI 48428					WEATHER PERMITTING				

EAST BERLIN

									4		
Address	MASTERS RD. @ BER\	/ILLE				Form Required:	Yes		No	Χ	
City	ALLENTON	State	MI	Zip	48003	Grave Location Required on Memorial:	Yes		No	Χ	
Phone	(810) 798-3793					Symbol Required on Memorial:	Yes		No	Χ	
Fax	(810) 798-3793 (CALL F					If yes, what symbol?			-		
Email	tracipewinski@yahoo.co	<u>m</u>				Benches Permitted:	Yes		No	Χ	
Contact	JERRY PEWINSKI	Phone	(810) 6	614-5605		Borders Required on Foundation:	Yes	Χ	No		
				Rules & Reg	ulations - Installati	on Fee					
INSTALL	ATION FEE: .50 PSI, \$17	5.00 MINIM	1UM								
PAYMEN	T REQUIRED AT TIME O	F FOUNDA	ATION RE	EQUEST.							
,											
ı											
1											
Notes: #	OF FULL BURIALS PER GF	RAVE: 1 # C	F CREMA	AINS PER GRA	AVE: 2 OR 1 FULL AN	D 1 CREMATION PER GRAVE					
Installati	on Fee Payable to:					Spring delivery begins (date):					
JERRY P	EWINSKI					WEATHER PERMITTING (IF FOUNDA	ATION	IS IN)			
8051 ALN	MONT ROAD					Fall/Winter Delivery "cutoff" (date):					
ALMONT	, MI 48003					WEATHER PERMITTING					

EASTLAWN

										1	
Address	1060 ORION RD.					Form Required: F	<u>ORM</u>	Yes	X	No	
City	LAKE ORION	State	MI	Zip	48362	Grave Location Red	juired on Memorial	: Yes		No	Х
Phone	(248) 693-8391					Symbol Required or	n Memorial:	Yes		No	Χ
Fax	(248) 693-5874					If yes, what symbo	i?				
Email	villageadmin@lakeorion.u	<u>IS</u>				Benches Permitted:	Call first	Yes	Х	No	
Contact	ANDREA EXT. 100	Phone	(248) 693	-8391		Borders Required o	n Foundation:	Yes		No	Х
			Ru	ıles & Regulat	ions - Installation	Fee					
GOVERN	MENT MARKERS ON UNI	MARKED (GRAVES O	NLY. GARDEN	N OF CROSS NEE	DS TO BE FLUSH					
MARKER	BRONZE OR GRANITE W	ITH BUIL	T IN VASE.								
MONUME	ENTS NOT TO EXCEED 30	" HGT AN	D THAT IN	CLUDES THE	BASE.						
FOUNDA	TION FEE: .50 PSI										
24"x 12" -	\$144.00										
36"x 12" -	\$216.00										
NO VA BI	RONZE MOUNTED TO UP	RIGHTS (OR ADDED	TO GRAVES A	ALREADY MARKE	D					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CRE	MAINS PER G	RAVE 2 (3 WITH	SPECIAL PERMISSI	ON)				
0	R 1 FULL BURIAL AND 1	CREMATI	ON PER G	RAVE							
Installatio	on Fee Payable to:					Spring delivery be	gins (date):				
VILLAGE	OF LAKE ORION					WEATHER PERMI	ΓΤΙNG				
21 EAST	CHURCH STREET					Fall/Winter Deliver	y "cutoff" (date):				
LAKE OR	ION, MI 48362					WEATHER PERMI	ΓΤING				

<u>ELMWOOD</u>

(SAME ADDRESS AS ABOVE)

									1	
Address	1200 ELMWOOD AVENU	JE				Form Required:	Yes		No	Х
City	DETROIT	State	MI	Zip	48207	Grave Location Required on Memorial:	Yes		No	Х
Phone	(313) 567-3453					Symbol Required on Memorial:	Yes		No	Х
Fax	(313) 567-8861					If yes, what symbol?				
Email	bsmith@elmcem.org					Benches Permitted: See note below	Yes	Х	No	
Contact	BONITA SMITH	Phone	(313) 567	-3453		Borders Required on Foundation:	Yes		No	Х
										1
			Ru	les & Regulati	ions - Installation	Fee				
FLUSH M	ARKERS, MONUMENTS A	AND ODD	DUPLICATI	E SIZES. CALI	L TO CONFIRM M	ONUMENT AND LEDGER INSTALLAT	ION.			
ENGRAV	ED PHOTOS AND ETCHIN	NGS ARE	<u>ALLOWED</u>	ONLY ON JET	BLACK GRANITI	<mark>E. NO CERAMIC OR PHOTOS WITH P</mark>	<u>ROTE</u>	CTIVE		
GLASS A	LLOWED.									
*IF FAMIL	Y OWNS 2 OR MORE GR	AVES THE	EN BENCHI	ES ALLOWED	IN CERTAIN SEC	TIONS ONLY.				
SLANTS I	NOT ALLOWED IN ALL AF	REAS - CA	LL AHEAD							
FOUNDA [*]	TION FEES: NOTE: (All memor	rials to be i	nstalled by Eli	mwood Cemetery	Employees)				
16"x 8" &	24"x 12" - \$300.00	24x13x4	to 30x24x4	- \$400.00						
LARGER	THAN 30" x 24" - \$500.00	1/2 LEDG	SERS 30x30	0x6 Min - \$500.	00					
LEDGERS	S - \$600.00	MONUME	ENT INSTA	LL Per Square	Foot of base = \$20	00.00				
SLANT FE	EE - \$550.00 (\$300.00 INS	STALL & \$2	250.00 PRI\	/ILEGE)						
SLANT M	ARKERS 24"x 10"x 16" (O	NLY INDIV	IDUAL) AR	E ALLOWED II	N MOST AREAS.	BRONZE PLAQUE				
AFFIXED	TO A SLANT MARKER AL	LOWED.	CONTACT	CEMETERY T	O BE SURE A SLA	ANT MARKER IS				
ALLOWE	D IN THEIR SECTION.									
Notes: #	otes: # OF FULL BURIALS PER GRAVE: 2 # OF CREMAINS PER GRAVE: 4 OR 1 FULL AND 4 CREMAINS PER GRAVE									
Installatio	on Fee Payable to: Cash,	Check &				Spring delivery begins (date):				
ELMWOC	DD CEMETERY Credit	Card VIA	phone			APRIL 15TH (OUTSIDE ORDERS)				

Fall/Winter Delivery "cutoff" (date):
NOVEMBER 16TH (OUTSIDE ORDERS)

EVERGREEN - DETROIT

Address	19807 WOODWARD AVE	Ξ.				Form Required: FORM	Yes	X	No	
City	DETROIT	State	MI	Zip	48203	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(313) 368-1330 (313) 368-9849					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ
Email	evergreen_cemetery@yah	noo.com				Benches Permitted:	Yes		No	Х
Contact	ANGELA OR BETH	Phone	(313) 36	68-1330		Borders Required on Foundation:	Yes		No	Х
			F	Rules & Regula	ations - Installation	1 Fee				
GRANITE	FLUSH MARKERS ONLY	. MONUM	ENTS AN	ID LEDGERS.	MONUMENTS MU	IST BE A POLISH 3				
(POLISH	TOP). ALL MONUMENTS	MUST HA	VE A BAS	SE AND OVER	ALL HEIGHT NOT	OVER FOUR FEET OR				
•	AN TWO FEET, FOUR INC									
BABY MA	RKERS	250.00)							
24"x 12" (SINGLE MARKERS)	275.00)							
48"x 12" (COMPANION MARKERS)	375.00)							
LEDGERS	3	750.00)							
MONUME	NTS	800.00)							
MONIIME	ENT & LEDGER SIZES NE		ADDDO	VAL EDOM CE	METEDV					
MONOME	INT & LEDGER SIZES NE	ED PRIOR	APPRO	VAL FROIVI CE	WIETERT					
Notes: #	OF FULL BURIALS PER G	GRAVE: 1	# OF CRI	EMAINS PER G	GRAVE: UP TO 5 C	OR 1 FULL BURIAL AND				
	D UP TO 4 CREMAINS PE									
			(11011							
Installatio	on Fee Payable to:					Spring delivery begins (date):				
EVERGR	EEN CEMETERY					MARCH 1ST				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						NOVEMBER 1ST				

EVERGREEN - GRAND BLANC

Address	3415 E. HILL RD.					Form Required:	Yes		No	Х
City	GRAND BLANC	State	MI	Zip	48439	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(810) 694-6541					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 694-6541					If yes, what symbol?			•	
Email	grandblancevergreencem	etery@gm	ail.com			Benches Permitted:	Yes	Χ	No	
Contact	GARY POTTER or ALICE POTTER	Phone	(810) 694-	6541		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulati	ions - Installation	Fee				
FLUSH M	ARKERS AND MONUME	NTS. SECT	TIONS INDI	CATED BY RO	DW # AND GRAVE	E. CERTAIN SECTIONS				
ARE SINC	GLE FLAT ONLY. MARKE	RS TO FA	CE WEST (A	A FEW EXCE	PTIONS IN OLDER	R PART OF CEMETERY)				
NOT TO E	EXCEED 40" PER GRAVE	(SMALLEF	R IN OLDER	PART OF CE	METERY)					
AND 24" I	FRONT TO BACK									
GRANITE	- BRONZE - MARBLE									
FOUNDA	TION FEE: \$10.00 PER LI	NEAR INC	Н							
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CREM	AAINS PER G	RAVE: 3					
										<u>_</u>
Installatio	on Fee Payable to: Cas	h, Check &	& Credit			Spring delivery begins (date):				
EVERGR	EEN CEMETERY Ca	rd VIA Pho	ne			WHEN WEATHER BREAKS				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						OCTOBER 15TH FOR FOUNDATIONS	S			

EVERGREEN - LAKE ORION

A al al u a a a		D				Form Descriped FORM	Vaa	V	NIA	
	CHURCH & LAPEER R					Form Required: FORM	Yes	Х	No	
City	LAKE ORION	State	MI	Zip	48362	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 693-8391					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 693-5874					If yes, what symbol?			,	
Email	villageadmin@lakeorion	<u>.us</u>				Benches Permitted: Designated areas	Yes	Χ	No	
Contact		Phone	(248) 6	93-8391		only Call first!				
						Borders Required on Foundation:	Yes		No	Χ
				Rules & Re	gulations - Installat	ion Fee				
GOVERN	MENT MARKERS ON UI	NMARKED (RAVES	ONLY. GA	RDEN OF CROSS N	EEDS TO BE FLUSH				
MARKER	BRONZE OR GRANITE	WITH BUIL	T IN VAS	SE.						
MONUME	NTS NOT TO EXCEED	30" HGT AN	D THAT	INCLUDES	THE BASE.					
BENCHES	S ARE PERMITTED IN D	ESIGNATE	O AREAS	SONLY.						
FOUNDA	TION FEE: .50 PSI									
24"x 12" -	\$144.00									
36"x 12" -	\$216.00									
NO VA BE	RONZE MOUNTED TO U	IPRIGHTS C	R ADDE	D TO GRA	VES ALREADY MAR	KED				
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CI	REMAINS P	PER GRAVE 2 (3 WIT	TH SPECIAL PERMISSION)				
0	R 1 FULL BURIAL AND	1 CREMATI	ON PER	GRAVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
VILLAGE	OF LAKE ORION					WEATHER PERMITTING				
21 EAST	CHURCH STREET					Fall/Winter Delivery "cutoff" (date):				
LAKE OR	ION, MI 48362					WEATHER PERMITTING				

FAIRVIEW - ANN ARBOR

								-	
Address	KELLOGG & WRIGHT ST	Γ.			Form Required:	Yes		No	
City	ANN ARBOR	State	MI	Zip	Grave Location Required on Memorial:	Yes		No	
Phone					Symbol Required on Memorial:	Yes		No	
Fax					If yes, what symbol?			-	
Email	bradbouchie@ymail.com				Benches Permitted: Call contact	Yes		No	
Contact	BRAD BOUCHIE	Phone	(734) 274	-7422	Borders Required on Foundation:	Yes	Χ	No	
					2" border on all sides				
			Ru	les & Regulations - Installation	Fee				
FOUNDA	TION FEE:								
.65 PSI, N	11NIMUM \$200.00								
PLUS 2" A	ROUND FOR FOUNDATIONS	6							
APPROX	1 MONTH TO SET FOUND	DATIONS							
1 FLAT M	ARKER ON INFANT OR C	REMATIO	N GRAVES	10x20					
2 LOTS R	EQUIRED TO GET MONU	JMENT							
NO TRIPL	LE MARKERS ALLOWED								
Notes:									
_									ı
Installatio	on Fee Payable to:				Spring delivery begins (date):				
BRAD BC	UCHIE				WEATHER PERMITTING				
4651 KEH	IOE RD.				Fall/Winter Delivery "cutoff" (date):				
CLINTON	, MI 49236				OCTOBER 1ST				

FAIRVIEW - BRIGHTON

BRIGHTON, MI 48116

Address	1001 FLINT RD.					Form Required:	Ye	es	No	Χ
City	BRIGHTON	State	MI	Zip	48116	Grave Location Required on M	Memorial: Ye	es	No	Χ
Phone	(810) 227-0463					Symbol Required on Memoria	ıl: Ye	es	No	Χ
Fax	(810) 227-6420					If yes, what symbol?				
Email	brownt@brightoncity.org					Benches Permitted: Call co	ntact Ye	es	No	
Contact	TARA BROWN	Phone	(810) 227-	0463		Borders Required on Foundat	tion: Ye	es X	(No	
						2" border on all	sides			
			Rul	es & Regulati	ions - Installation	Fee				
MONUME	NTS, ELEVATED MARKEI	RS, AND B	RONZE MA	ARKERS (EXC	EPT GOVERNME	NT). SECTION 11 IS				
FLUSH O	NLY. 2" BORDERS FOR F	OUNDATI	ONS WILL	BE AT THE DI	ISCRETION OF T	HE CUSTOMER.				
INSTALL	FEE FOR FOUNDATIONS	NOT LIST	ED BELOV	V = \$.40 PSI						
"BRIGHTO	ON HILLS CEMETERY - INCL	UDES VA -	ACROSS ST	TREET FROM F	AIRVIEW"					
CONCR	ETE FOUNDATION SIZES					NO CONCRETE FOUNDATION	<u>ON</u>			
24"x 12" -	\$123.00 <i>Custom Foundations</i>	52"x 18" -	\$169.00			16"x 8" - \$75.00	CREMAINS A			
28"x 16" -	\$125.00 <i>(those not</i>	58"x 18" -	\$177.00			24"x 12" - \$85.00	COLUMBARIUPLAQUES = \$			
36"x 16" -		60"x 16" -	\$181.00			36"x 12" - \$95.00				
40"x 16" -		66"x 18" -	\$183.00			42"x 12", 48"x 12"- \$110.00				
42"x 16" -	\$156.00	72"x 18" -	\$190.00			54"x 12" - \$115.00				
42"x 18" -	\$160.00	80"x 20" -	\$198.00							
48"x 22" -	\$173.00	98"x 16" -	\$210.00							
Notes: E	ACH PLOT CAN CONTAIN	I 1 FULL B	URIAL AND	ONE CREMA	ATION OR 2 CREM	MATIONS				
Installatio	on Fee Payable to:					Spring delivery begins (date	e):			
CITY OF	BRIGHTON					AT THE SEXTON'S DISCRE	TION			
200 NOR	TH FIRST ST.					Fall/Winter Delivery "cutoff"	' (date):			

AT THE SEXTON'S DISCRETION

FAIRVIEW - LINDEN

Address	211 E. SILVER LAKE RO	DAD				Form Required:	Yes		No	Χ
City	LINDEN	State	MI	Zip	48451	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 735-7980					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 735-4793					If yes, what symbol?			1	
Email	dpwdirector@lindenmi.us	<u>S</u>				Benches Permitted:	Yes	Х	No	
Contact	DON GRICE	Phone	(810) 735-	-7980		Borders Required on Foundation:	Yes		No	Χ
•										1
FOUNDA	TION FEE: .50 PSI, MINI	MUM \$100.	00. VA MA	RKER FEE IS	\$31.00					
NO GRA	/E MARKER LARGER TH	IAN 36" x 18	3" IS PERM	ITTED ON A S	INGLE GRAVE;					
NO MARI	KER LARGER THAN 72" >	k 18" IS PE	RMITTED II	N FAIRVIEW C	CEMETERY.					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CREI	MAINS PER G	RAVE: 6					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	LINDEN					APRIL 30TH				
132 E. BF	ROAD ST., PO BOX 507					Fall/Winter Delivery "cutoff" (date):				
LINDEN,	MI 48451					SEPTEMBER 15TH				

FARMINGTON HILLS

											_	
Address	12 MILE & DANVER	RS ROAD						Form Required: FORM	Yes	Х	No	
City	FARMINGTON HIL	LS S ta	ate	MI	Zip	4	8335	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 871-2530							Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 871-2561							If yes, what symbol?			-	
Contact	CITY OF FARMINGTO	ON HILLS						Benches Permitted:	Yes		No	Х
	31555 W. ELEVEN M FARMINGTON HILLS		one					Borders Required on Foundation:	Yes		No	Х
					Rules &	& Regulation	ns - Installation	Fee				
HISTORI	CAL CEMETERY - B	URIALS F	OR E	XISTING	PLOTS	ONLY.						
EAST FA	RMINGTON CEMET	ERY IS LO	CATI	ED ON T	HE NOI	RTH SIDE O	F TWELVE MIL	E ROAD,				
BETWEE	N MIDDLEBELT ANI) INKSTE	R.									
AKA Utley	y Cemetery											
WEST FA	ARMINGTON CEMET	TERY IS L	OCAT	ED AT T	HE SOI	JTHEAST C	ORNER OF TW	ELVE MILE & HALSTED.				
1.00 PSI												
Installation	on Fee Payable to:	CASH, CI	HECK					Spring delivery begins (date):				
Inch Mem	norials	CC VIA P	HONE					WEATHER PERMITTING				
580 S. Ma	ain St.							Fall/Winter Delivery "cutoff" (date):				
Northville	, MI 48167							WEATHER PERMITTING				

FARMINGTON - NORTH

P.O. BOX 112

HIGHLAND, MI 48357

											-	
Address	29900 FARMINGTON RI	Э.					Form Required:		Yes		No	Х
City	FARMINGTON HILLS	State	MI	Zip	48334		Grave Location Requir	ed on Memorial:	Yes		No	Χ
Phone	(248) 887-6700						Symbol Required on M	lemorial:	Yes		No	Χ
Fax	(248) 887-4487						If yes, what symbol?				=	
Email							Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG		` ,	387-6700			Borders Required on F	oundation:	Yes	Χ	No	
НСМ	HURON CEMETERY MA	INTENANO)E				2" borde	r on all sides				
				Rules & Re	egulations - Ins	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	IONUME	NTS - 36" N	MAX PER GRA	VE						
<u>GOVERN</u>	MENT ISSUED MARKERS	<u>S - ALL TYI</u>	PES{	\$ <u>250.00</u>								
FLUSH S	ETTING OF GRANITE & E	BRONZE O	N GRAN	IITE (NO FO	OUNDATION)							
\$0.50 PSI	, MINIMUM \$175.00											
FOUNDA	TION FEE FOR MONUME	NTS & BR	ONZE O	N CONCRE	ETE (NON VA)							
\$0.70 PSI	OF FOUNDATION, MINI	иUM \$250.	00									
ALL FOUI	NDATIONS MUST BE 2" L	ARGER O	N ALL S	IDES THAN	MONUMENT	BASE.						
ADD 4" To	O LENGTH AND WIDTH (OF BASE T	O DETE	RMINE FO	UNDATION SIZ	ZE NEEDE	D.					
ADD \$50.	00 FOR BUILT IN VASE											
MISCELL	ANEOUS ITEMS											
CORNER	MARKERS (SET OF 4)	\$125.00										
VASE ON	LY	\$100.00) (ADD \$	50.00 FOR	ALL FEES FOI	R BUILT IN	NVASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CF	REMATION	BURIALS PER	GRAVE:	2-3					
(C	ALL MIKE @ HURON CE	METERY M	1AINTEN	IANCE FIRS	ST)							
						_						
Installatio	on Fee Payable to:	CASH,	CHECK				Spring delivery begir	ns (date):				
HURON (EMETERY MAINTENANG	CE CC V	IA PHOI	NE			WEATHER PERMITTI	ING				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

FERNDALE

Address	14732 SIBLEY RD.	P.O. BOX 218	2			Form Required:	Yes	No		Χ
City	RIVERVIEW	State	MI	Zip	48193	Grave Location Required on Memorial:	Yes	No		Χ
Phone	(734) 282-3145					Symbol Required on Memorial:	Yes	No		Χ
Fax	N/A					If yes, what symbol?			_	
Email	ferndalecemetery@gr	mail.com				Benches Permitted:	Yes	No	L	Х
Contact	RALPH E. or LYDIA E. ODELL	Phone or	` ,	658-5724 58-5725		Borders Required on Foundation:	Yes	No		Х
				Rules & Regu	lations - Installa	tion Fee				
ELMHUR	ST - FLAT MARKERS	ONLY (SINGL	E GRAN	IITE 24"x 12"x 4	4"), (COMPANIOI	N GRANITE 48"x 12"x 6")				
GLENDAI	E, OAKLAWN, MAPLE	EHURST, PINE	ELAWN	(SAME AS ELN	MHURST) PLUS					
(BEVEL G	GRANITE 24"x 12"x 6"),	, (SLANT GRA	NITE 24	l"x 12"x 16"), (F	OOTSTONE 24"	x 12"x 4" GRANITE)				
INFANT N	//ARKERS 16"x 10"x 4	FLAT GRANI	TE							
MONUME	NTS - <u>BASE</u> NO LESS	S THAN 4' OR	MORE	THAN 5' IN LEN	NGTH. NO LESS	THAN 1' OR MORE THAN				
1'4" IN W	IDTH. <u>DIE</u> NO LESS T	HAN 8" THICH	AND N	IO LESS THAN	2' HIGH FROM	BASE.				
NO BRON	NZE ALLOWED. MARI	KERS ON SAN	IE LOT	MUST BE DUP	LICATE.					
FOUNDA	TION FEE:									
16"x 10"x	4" (BABY) - \$250.00	4' BASE	- \$600.0	0						
24"x 12" (GRANITE - \$250.00	4'6" BAS	E - \$650	.00						
48"x 12"x	6" FLUSH - \$500.00	5' BASE	- \$700.0	0						
Notes: # (OF FULL BURIALS PER	GRAVE: 1 # O	F CREM	AINS PER GRAV	/E: 3 OR 1 FULL A	ND 2 CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FERNDAI	LE CEMETERY					WEATHER PERMITTING				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

FLINT MEMORIAL PARK

Address	9506 NORTH DORT HIG	HWAY				Form Required: FORM	Yes	X	No	
City	MT. MORRIS	State	MI	Zip	48458	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 547-5655					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 686-5930					If yes, what symbol?			_	
Email	thamp@stonemor.com					Benches Permitted: Call for restrictions	Yes	Х	No	
Contact	TAMMY HAMPTON	Phone	(810) 5	47-5644		Borders Required on Foundation:	Yes	Х	No	
	RICK ANGELINE - GROUN	DS SUPERI	NTENDE	NT		2" border req. on flush markers, 4" border on	monum	ents	_	
				Rules & Regu	ılations - Installat	ion Fee				
FOUNDA	TION FEE:									
BRONZE	ONLY - \$495.00 FOR SIN	GLE MARI	KERS W	ITH A BASE U	JP TO 28"x 18"x 4'					
PROOF C	F MARKER INCLUDING	SPECS MU	JST BE	SUBMITTED T	TO FLINT MEMOR	RIAL				
COMPAN	ION MARKERS AND BEN	CHES - \$8	95.00							
FOR APP	ROVAL PRIOR TO PROD	UCTION.	NO ENG	RAVING IN GI	RANITE - IT MUS	Γ BE DONE IN THE				
BRONZE.	MUST BE MOUNTED OF	N A BASE	UNLESS	MATCHING C	OTHERS IN THE L	OT. ANY COLOR GRANITE				
BASE IS	ALLOWED.									
REMOVE	AND RE-INSTALL FLUSH	H MARKER	- \$200.0	0						
24"x 12" (ON A 28"x 16"x4" BASE									
24"x 14" (ON A 28"x 18"x4" BASE									
44"x14" O	N A 48"x18"x4"									
Notes: #	OF FULL BURIALS PER G	GRAVE: 1 (DEPEND	ING ON LOCA	ATION) # OF CRE	EMAINS PER GRAVE: 2				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FLINT ME	MORIAL PARK					APRIL 1ST				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						OCTOBER 30TH				

FLUSHING

Address	750 COUTANT ROAD)				Form Required:	Yes		No	Х
City	FLUSHING	State	MI	Zip	48433	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(810) 659-5665 (810) 659-0569					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х
Email	administration@flushi	ngcity.com				Benches Permitted: <i>With permission</i>	 Yes	Х	No	
Contact	JEFF CLARK	Phone	(810) 6	59-5665		Borders Required on Foundation:	Yes		No	
Oomaoi	JETT CETAIN	1 Hone	(010) 0	0000		2" border required	100]. 10	
				Rules & Reg	ulations - Installa					
FOUNDA	TION FEE: .65 PSI			_						
	 ROUND FOR FOUNDA	ATIONS								
ı										
ı										
.		-	" OF O		D 0D 41/E 4					
Notes: #	OF FULL BURIALS PE	R GRAVE: 1	# OF CI	REMAINS PE	R GRAVE: 1					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FLUSHIN	G CEMETERY OR CIT	Y OF FLUSHI	NG			WEATHER PERMITTING (USUALLY N	ЛАҮ 15	ST)		
725 EAST	Γ MAIN STREET					Fall/Winter Delivery "cutoff" (date):				
FLUSHIN	G, MI 48433					WEATHER PERMITTING				

FOREST HILL - ANN ARBOR

									•	
Address	415 SOUTH OBSERVATO	ORY				Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip	48104	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 663-5018					Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 663-2847					If yes, what symbol?			•	
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Х	No	
Contact	BRAD BOUCHIE		Phone			Borders Required on Foundation:	Yes		No	Х
			Ru	iles & Regulat	ions - Installatior	r Fee				
FOUNDA	TION FEE:									
.65 PSI, N	//INIMUM \$200.00									
BRONZE	, FLUSH GRANITE, SLAN	ΓS, BEVEL	S, AND MC	ONUMENTS						
34" MAXI	MUM FOR SINGLE									
MIN 4" TH	HICK GRANITE/MARBLE.	ALL MEMO	RIALS MU	ST COMPLY V	WITH THE CEME	TERY APPEAL,				
NON TRA	ADIONAL MONUMENTS W	ILL NEED	TO BE AP	PROVED BEF	ORE PLACEMEN	Г.				
(THE CEI	METERY HAS A RIGHT TO	REMOVE	OR NOT	ACCEPT AN L	INDESIRED MON	UMENT)				
Notes: #	OF FULL BURIALS PER GRA	.VE: 1 # OF	CREMAIN:	S PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE				
1101001 :::			0.12							
Installation	on Fee Payable to:	CASH, Ch	<u>IECK</u>			Spring delivery begins (date):				
BRAD BC	OUCHIE					WEATHER PERMITTING				
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	I, MI 49236					OCTOBER 1ST				

FOREST HILL - DETROIT

Address	LYNDON AT MYERS					Form Required:	Yes	N	No	Х
City	DETROIT	State	MI	Zip	48227	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(313) 224-3270					Symbol Required on Memorial:	Yes	\	No	Χ
Fax	(313) 224-1629					If yes, what symbol?				
Email						Benches Permitted:	Yes		No	
Contact	DETROIT CITY CLERK PLANNING & DEVELOP		(313) 224	1-3270		Borders Required on Foundation:	Yes		No	
			Ru	ıles & Regulat	ions - Installatio	n Fee				
СЕМЕТЕ	RY UNDER RE-ORGANIZA	ATION.								
https://det	roitmi.gov/departments/par	rks-recreat	ion/cemete	ries/forest-hill-o	<u>cemetery</u>					
contact ^o	ST Enterprises I directly	at 313-4	00-5304							
contacts	or Effect prises i all eetry	ut 515 4	30 3304							
Notes: #	OF FULL BURIALS PER GRA	AVE: #O	F CREMAIN	S PER GRAVE:	OR FULL AND	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FOREST	HILL CEMETERY					WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

FOREST LAWN MEMORIAL PARK - DETROIT

Address	11851 VAN DYKE					Form Required: FORM	Yes	X	No	
City	DETROIT	State	MI	Zip	48234	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(313) 921-6960 (313) 921-0754					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ
Email	jbokas@plcorp.com					Benches Permitted: Call the office	Yes	Х	No	
Contact MMG	John Bokas, GM	Phone				Borders Required on Foundation:	Yes		No	Х
			Rı	ules & Regulat	ions - Installation	Fee			•	
GRANITE	, BRONZE AND MONUME	ENTS IN DE	ESIGNATE	D AREAS. NO	BRONZE VASES	ALLOWED.				
BRONZE	MUST HAVE GRANITE BA	ASE EVEN	IF MATCH	HING ONE THA	T HAS CONCRE	ΓE.				
	FEES:									
	Flagging Fee:	\$175.00 F	Payable to	Forest Lawn Me	emorial Park					
	Setting Fee:	\$1.00 PS	l payable to	o Inch Memoria	ls					
	Foundation Fee:	\$1.00 PS	l Payable t	o Forest Lawn I	Memorial Park					
						** CALL JOE TO DELIVER 248-756-9	538 **			
								7		
						**NOTE: EMAIL CEMETERY FORM	ГО:			
						ypotts@forestlawndetroit.com				
MONUME	ENTS & BENCHES: \$1.00	PSI OF BA	SE			AND SEND COPY WITH CHECK		J		
REMOVA	L FEE - \$75.00									
Notes: #	OF FULL BURIALS PER GRA	AVE: # OI	F CREMAIN	IS PER GRAVE:	OR FULL AND	CREMATION PER GRAVE				
										1
Installatio	on Fee Payable to: **SEE	NOTE AB	OVE			Spring delivery begins (date):				
FOREST	LAWN MEMORIAL PARK					APRIL 1ST				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						NOVEMBER 1ST				

FOREST LAWN - SAGINAW

Address	3210 S. WASHINGTON A	AVE.				Form Required:	Yes	No	Χ
City	SAGINAW	State	MI	Zip	48601	Grave Location Required on Memorial:	Yes	No	Х
Phone	(989) 759-1656					Symbol Required on Memorial:	Yes	No	Х
Fax	(989) 759-1409					If yes, what symbol?			
Email	jsaldivar@saginaw-mi.com	<u>m</u>				Benches Permitted: Unless owned	Yes	No	Х
Contact	JENNIFER SALDIVAR	Phone	(989) 759-7	1656		Borders Required on Foundation:	Yes	No	Χ
			Rule	es & Regulati	ons - Installation	Fee			
GRANITE	MARKERS ONLY - NO B	RONZE							
FOUNDA [*]	TION FEE:								
.55 PSI, M	IINIMUM \$165.00. GRANI	ITE ONLY.							
SOME SE	CTIONS PERMIT FOR FL	USH MARI	KERS ONLY	' .					
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 WITH	THE RIGHT	OF SECOND B	URIAL OF CREMAII	NS AT THE FOOT OF A			
Fl	JLL BODY BURIAL. # OF CF	REMATION E	BURIALS PEF	R FULL SIZED (GRAVE: 2				
Installatio	on Fee Payable to:					Spring delivery begins (date):			
CITY OF	SAGINAW					WEATHER PERMITTING			
1315 S. W	/ASHINGTON AVE.					Fall/Winter Delivery "cutoff" (date):			
SAGINAV	/, MI 48601					NOVEMBER 15TH			

FOUR TOWNS

WATERFORD TOWNSHIP

(SAME ADDRESS AS ABOVE)

Address	5240 CIVIC CENTER DR	IVE				Form Required:	Yes		No	Х
City	WATERFORD TWP	State	MI	Zip 4	8329	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 618-7437					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 674-8658					If yes, what symbol?			1	
Email	mbellehumeur@waterford	dmi.gov				Benches Permitted:	Yes	Х	No	
Contact	MARY BELLEHUMEUR	Phone	(248) 618-	7437		Borders Required on Foundation:	Yes		No	Х
DPW	BRETT THOMPSON: 248	3-639-8450								
			Rul	es & Regulation	ns - Installation	Fee				
FLUSH, G	RANITE, BEVELS, SLAN	TS AND MO	ONUMENTS	S. SINGLE GRA	VE IS <mark> TO BE N</mark> O	O LARGER THAN 30".				
SECTION	A - MEMORIALS WILL BE	BACK TO	BACK.			MAXIMUM COMPANION IS 48".				
NO ENGF	RAVING ON BACK SIDE.									
_										
FOUNDA	TION FEE: 1.00 PSI - MIN	IIMUM \$28	8.00							
24"x 12" -	\$288.00	46"x 12" -	\$552.00							
30"x 12" -	\$360.00	48"x 12" -	\$576.00							
36"x 12" -	\$432.00	52"x 12" -	\$624.00							
42"x 12" -	\$504.00	46"x 14" -	\$644.00							
48"x 12" -	\$576.00	52"x 14" -	\$728.00							
VETERAN	FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED B	Y A REPRESEN	ITATIVE FROM	THE				
FAMILY A	ND SEXTON (BRETT TH	OMPSON 2	248-639-845	50).						
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 4	OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to: Cash &	& Checks /	Accepted			Spring delivery begins (date):				

WEATHER PERMITTING (PLEASE CALL FIRST)

WEATHER PERMITTING (PLEASE CALL FIRST)

Fall/Winter Delivery "cutoff" (date):

FRANKLIN

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

											_
Address	26220 SCENIC HIGHWA	Y, FRANKI	JN RD.			Form Required: ADMIN	N FEE \$150.00	Yes	X	No	
City	FRANKLIN	State	MI	Zip		Grave Location Requir	ed on Memorial	Yes		No	Χ
Phone	(248) 887-6700					Symbol Required on M	lemorial:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?				_	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @	Phone	(248) 887	'- 6700		Borders Required on F	oundation:	Yes	Х	No	
HCM	HURON CEMETERY MA	INTENANO	E			2" bor	der on all sides			_	
			Rı	ıles & Regulations - In	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMEN ⁻	TS - 36" MAX PER GRA	AVE		(24	VE BANC 18) 200-9	9493		
GOVERNI	MENT ISSUED MARKERS	S - ALL TYF	PES\$2	<u>50.00</u>				MINIST			
FLUSH SE	ETTING OF GRANITE & E	RONZE O	N GRANIT	E (NO FOUNDATION)			BE AP	EMORIA PROVED	BY AN	D	
\$0.50 PSI	, MINIMUM \$175.00							ED THRO			
FOUNDAT	TION FEE FOR MONUME	NTS & BR	ONZE ON	CONCRETE (NON VA)				SSOCIAT	_		
\$0.70 PSI	OF FOUNDATION, MINIM	ИUM \$250.	00				THI	OVIDER E CEMET AGEMEN	ERY A		
ALL FOUN	NDATIONS MUST BE 2" L	ARGER OI	N ALL SIDI	ES THAN MONUMENT	BASE.		\$150	MADE (KLIN CEI	OUT TO		
ADD 4" TO	D LENGTH AND WIDTH (OF BASE T	O DETER	MINE FOUNDATION SIZ	ZE NEEDE	ED.					
ADD \$50.0	00 FOR BUILT IN VASE										
MISCELLA	ANEOUS ITEMS						48x14x48	B MAX F	OOTF	RINT	
CORNER	MARKERS (SET OF 4)	\$125.00					FOR MO	NUMEN	١T		
VASE ON	LY	\$100.00	(ADD \$50	.00 FOR ALL FEES FO	R BUILT II	N VASE)	NO PAIN	T/LITH	0		
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # O	CREMATI	ON BURIALS PER GRAV	E: 2-3						
(CA	ALL MIKE @ HURON CEME	TERY MAIN	TENANCE F	FIRST)							
		_					_				
Installatio	n Fee Payable to:	CASH, (CHECK			Spring delivery begin	ıs (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

<u>GAGE</u>

Address	FENTON RD.					Form Required:	Yes		No	Х
City	FENTON TWP	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 629-1537					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 629-9736					If yes, what symbol?			_	
Email	info@fentontownship.org					Benches Permitted:	Yes	Х	No	
Contact	JULIE LEWIS @ TWP OR	Phone	(810) 629-	1537		Borders Required on Foundation:	Yes		No	Х
TIM @	GENESEE VALLEY VAULT	Phone	(810) 695-	5166						
			Rul	es & Regulations - In	stallation	Fee				
FLUSH, S	LANTS, BEVELS & MONU	MENTS								
FOUNDA ⁻	ΓΙΟΝ FEE:									
.50 PSI, \$	150.00 MINIMUM									
Notoci #	OF FULL BURIALS PER GRA	\\/F. 1 # O	E ODEMAIN!			CREMATION RED CRAVE				
Notes. #	OF FULL BURIALS FER GRA	AVE. I # O	r CKEWAIN.	5 FER GRAVE. 2 OR 1 F	OLL AND	CREWATION FER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	VALLEY VAULT					WEATHER PERMITTING				
	HOLLY RD.									
						Fall/Winter Delivery "cutoff" (date):				
HOLLY, M	II 4ö44Z					WEATHER PERMITTING				

GETHSEMANE

Address	10755 GRATIOT					Form Required:	Yes	No	Х
City	DETROIT	State	MI	Zip	48213	Grave Location Required on Memorial:	Yes	No	Х
Phone	(313) 778-2352 TEMP #					Symbol Required on Memorial:	Yes	No	Х
Fax	(313) 267-4258					If yes, what symbol?			
Email	gethsemancemetery@att	.net				Benches Permitted: See note below	Yes	X No	
Contact		Phone				Borders Required on Foundation:	Yes	No	Х
OFFICE:	313-922-8577								
			Ru	ıles & Regulat	ions - Installation	ı Fee			
FLUSH BR	ONZE AND GRANITE, MON	UMENTS A	ND SLANTS	(DEPENDING C	ON SECTION). UPF	IGHT MARKERS ARE			
ALLOWED	ONLY IN SEC. A, B, C, D, E	, EL, F, G, L	. & R.						
*BENCHE	S PERMITTED DEPENDING	ON SECTION	ON (CALL F	IRST)					
FOUNDAT	ION FEE:								
24x12x4 F	LUSH \$275.00								
CEMETER	Y TO SET MARKER!								
CALL FOR	FEE FOR LARGER THAN 2	4x12x4							
No found	lation required for Flush,	Bevels, SI	ants Half a	and Full Ledge	ers				
ALL BEN	CHES AND UPRIGHT MO	NUMENTS	MUSH HA	AVE A BASE D	ELIVERED WITH	THEM.			
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN:	S PER GRAVE:	4 OR 1 FULL AND	4 CREMAINS PER GRAVE			
Staking/F	Flagging fee mailed to:					Spring delivery begins (date):			
GETHSE	MANE CEMETERY MAK	E CHECK	PAYABLE			MAY 1ST			
10755 GR	RATIOT TO:	Enduring	Memories			Fall/Winter Delivery "cutoff" (date):			
DETROIT	, MI 48213 Cemete	ry Manage	ement Co.			NOVEMBER 1ST			

<u>GLEN EDEN - EAST</u>

							,		_	
Address	19810 26 MILE ROAD					Form Required: <u>Approved Layout</u>	Yes	X	No	
City	MACOMB TOWNSHIP	State	MI	Zip	48042	Grave Location Required on Memoria	: Yes		No	Х
Phone	(586) 677-5400					Symbol Required on Memorial:	Yes		No	Х
Fax	(586) 207-1393					If yes, what symbol?			_	
Email	nbellafaire@glenedenme	<u>emorialpark</u>	.org			Benches Permitted:	Yes		No	Х
Contact	NICOLE BELLAFAIRE	Phone	(586)	677-5400		Borders Required on Foundation:	Yes		No	Χ
				Rules & Rec	gulations - Installa	tion Fee				
BRONZE	, FLUSH GRANITE AND N	иопимен	TS ALL	OWED. VASI	ES ALLOWED. GF	RANITE BASES ALLOWED.				
NO BRO	NZE OVER INTERNAL AL	LOY. SLAI	NTS, BI	EVELS OR BE	NCHES ARE NOT	ALLOWED.				
FOUNDA	TION FEE:									
INDIVIDU	JAL MEMORIAL	250.0	0							
(BRON	ZE OR GRANITE)	250.0	0							
DOUBLE	INTERMENT (2 GRAVE)									
COMPAN	IION MEMORIAL	350.0	0							
(2) 24"x 1	2" OR (2) 24"x 14"	350.0	0						_	
(BOTH I	MARKERS ON 1 GRANITI	E BASE)					l paperw at Glen E			
HALF LE	DGER 24"x 30"	350.0	0			, mesie	it Gien L	uc.,	-450	
FULL LE	DGER	550.0	0							
VA MARK	(ER	250.0	0							
UPRIGHT	Γ MONUMENT	150.00 P	ER LIN	EAR FOOT						
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF (CREMAINS PE	ER GRAVE: 4					
Installation	on Fee Payable to & Mail	ed to the F	ollowii	ng:		Spring delivery begins (date):				
GLEN ED	EN MEMORIAL PARK					APRIL 1ST				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						OCTOBER 31ST				

<u>GLEN EDEN - LIVONIA</u>

Address	35667 W. 8 MILE RD.					Form Required: FORM	Yes	Χ	No	
City	LIVONIA	State	MI	Zip	48152	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 477-4460					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 477-3915					If yes, what symbol?				
Email	jwalters@glenedenmemo	rialpark.org	l			Benches Permitted:	Yes		No	Х
Contact	JANETTE	Phone	(248) 477-	4460		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulat	ions - Installation	Fee				
GARDEN	DEVOTION IS GRANITE.	ALL OTHE	R LOCATION	ONS ARE BRO	ONZE.					
VASES A	LLOWED. GRANITE BASE	S ALLOW	ED.							
INDIVIDUA	AL MEMORIAL	300.00)	24"x 8"x 28" /	32"x 14"x 8" SINC	GLES ALLOWED				
DOUBLE I	NTERMENT (FOR 1 GRAVE)	300.00)							
COMPANI	ON MEMORIAL	400.00)							
(2) 24"x 12	" OR (2) 24"x 14" (BOTH									
MARKER	RS ON 1 GRANITE BASE)	400.00)							
HALF LED	GER 24"x 30"	400.00)							
FULL LED	GER	600.00)							
VA MARKE	≣R	300.00)							
VA & MAT	CH (ON GRANITE									
CENTER	RED BETWEEN 2 GRAVES)	400.00)							
FAMILY E	STATE	750.00)							
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CREM	MAINS PER G	RAVE: 4					
Installatio	on Fee Payable to:	VISA & M	ASTERCAR	RD ONLY		Spring delivery begins (date):				
GLEN ED	EN MEMORIAL PARK					APRIL 1ST				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				

OCTOBER 31ST

GLEN EDEN - ST. CLAIR

Address						Form Required:	Yes	No	·	
City	ST. CLAIR	State	MI	Zip		Grave Location Required on Memorial:	Yes	No	, <u>L</u>	
Phone	(248) 477-4460					Symbol Required on Memorial:	Yes	No	, <u> </u>	
Fax	(248) 477-3915					If yes, what symbol?			_	
Email	jwalters@glenedenmemo	<u>rialpark.org</u>	l			Benches Permitted: Single Pedestal only	Yes	No	· L	
Contact	JANETTE	Phone	(248) 47	7-4460		Borders Required on Foundation:	Yes	No) <u> </u>	
			R	tules & Regulations - In	stallation	Fee				\neg
CREMAT	ON ONLY									
FLAT FLU	ISH BRONZE OR GRANIT	E MARKEI	RS							
	TION FEE:									
24"x 12"x	4" SINGLE - \$300.00									
24"x 16"x	4" COMPANION - \$300.00)								
Notes: #	OF FULL BURIALS PER GRA	AVF:1 # ∩F	CREMAII	N/PER GRAVE: 3 OR 1 FI	III AND 3 (CREMAINS PER GRAVE				
riotoo: "			OT CENTRAL	TWO ENGLISHED ON THE	<u> </u>	SKEM WING FER GROWE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
GLEN ED	EN MEMORIAL PARK									
35667 W.	8 MILE RD.					Fall/Winter Delivery "cutoff" (date):				
LIVONIA,	MI 48152									

GLENWOOD - FLINT

MACOMB, MI 48042

									_	
Address	2500 WEST COURT ST	REET				Form Required:	Yes		No	Х
City	FLINT	State	MI	Zip	48503	Grave Location Required on Mem	orial: Yes		No	Χ
Phone	(313) 567-3453					Symbol Required on Memorial:	Yes		No	Χ
Fax	(313) 567-8861					If yes, what symbol?			_	
Email	arcome02@gmail.com					Benches Permitted: Single Pedestal	only Yes	Х	No	
Contact	CHERI ARCOME	Phone	(586) 6	677-5400		Borders Required on Foundation:	Yes		No	Χ
				Rules & Reg	ulations - Instal	ation Fee				
FOUNDA [®]	TION FEE:									
24" X 12"	X 4" - \$250.00									
24" X 10"	X 16" - \$250.00									
MONUME	NTS & BENCHES - \$125.	00 PER LI	NEAR FO	ООТ						
ALL FLUS	SH, SLANTS & BEVELS A	RE TO BE	DELIVE	RED TO ELM	WOOD CEMETE	RY.				
MONUME	NTS & BENCHES ARE T	O BE DEL	IVERED	TO GLENWO	OD CEMETERY					
							d all paper			
							ri Arcome v			
						arco	me02@gn	nail.com	1	
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # C	OF CREMA	AIN/PER GRAV	/E: 3 OR 1 FULL <i>A</i>	ND 3 CREMAINS PER GRAVE				
Installatio	on Fee Payable to: GLEN	WOOD C	EMETER	RY		Spring delivery begins (date):				
Mail to:	BIRCHWOOD CEMETER	RY				APRIL 15TH				
	19810 26 MILE ROAD					Fall/Winter Delivery "cutoff" (da	to).			

NOVEMBER 15TH

GLENWOOD - WAYNE

Address	35200 FOREST ST.					Form Required:	Yes	No	Х
City	WAYNE	State	MI	Zip	48184	Grave Location Required on Memorial:	Yes	No	Χ
Phone	(734) 721-8600					Symbol Required on Memorial:	Yes	No	Χ
Fax	(734) 721-2048					If yes, what symbol?		-	
Email	brose@cityofwayne.com					Benches Permitted:	Yes	No	Х
Email	equeen@cityofwayne.com	<u>l</u>				Borders Required on Foundation:	Yes	No	Χ
Contact	BARB ROSE or ED QUEEN								
			Ru	les & Regulati	ions - Installation	Fee			
FLUSH B	RONZE & GRANITE, SLAN	ITS, BEVE	LS AND M	ONUMENTS.					
FOUNDA	TION FEE:								
FLAT - 12	" TO 36"	200.00)						
FLAT - 36	" TO 60"	250.00)						
UPRIGHT	- 12" TO 36"	300.00)						
UPRIGHT	- 36" TO 60"	350.00)						
CREMAIN	I - ONE SPOT 12X12X4	200.00)						
ANY SIZE	FOR SECOND MARKER - JU	IST HAS TO	BE FLAT.						
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN	S PER GRAVE:	4 OR 1 FULL AND	2 CREMAINS PER GRAVE			
									1
Installatio	on Fee Payable to: CITY (OF WAYN	Ē			Spring delivery begins (date):			
CITY OF	WAYNE					NO CUTOFF - WEATHER PERMITTIN	IG		
35200 FO	REST ST.					Fall/Winter Delivery "cutoff" (date):			
WAYNE,	MI 48184					NO CUTOFF - WEATHER PERMITTIN	IG		

GOODLAND TOWNSHIP

									7	_
Address	SOUTH EAST SIDE OF	M-53 & AR	MSTRON	IG RD.		Form Required:	Yes		No	Х
City	IMLAY CITY	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Χ
Phone	(810) 724-0169					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 721-0698					If yes, what symbol?			_	
Email	goodland@bigtube.net					Benches Permitted:	Yes		No	Х
Contact	MAVIS ROY	Phone	(810) 7	24-0169		Borders Required on Foundation:	Yes		No	Χ
			ı	Rules & Regulations - I	nstallation	Fee				
FOUNDA	TION FEE:									
.25 PSI, \$	3125.00 MINIMUM									
PAYMEN	T REQUIRED AT TIME OI	F FOUNDA	TION RE	QUEST.						
										ļ
										ļ
Notes: #	OF FULL BURIALS PER GR	RAVE: 1 # C	F CREMA	INS PER GRAVE: 2 OR 1	FULL AND	1 CREMATION PER GRAVE				
Installation	on Fee Payable to:]	Spring delivery begins (date):				
GOODLA	ND TOWNSHIP					WEATHER PERMITTING (If foundation	n prev.	installe	∍d)	
2374 N. V	'AN DYKE RD.					Fall/Winter Delivery "cutoff" (date):				
IMLAY CI	TY MI 48444					WEATHER PERMITTING				

<u>GRACELAWN</u>

Address	5710 N. SAGINAW ST.					Form Required: FORM	Yes	X	No	
City	FLINT	State	MI	Zip	48505	Grave Location Required on Memorial:	Yes	Χ	No	
Phone	(810) 789-5500					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 789-5646					If yes, what symbol?				
Email	adessinger@yahoo.com					Benches Permitted:	Yes	Χ	No	
Contact	AARON DESSINGER	Phone	(810) 789-5	5500		Borders Required on Foundation:	Yes		No	Χ
						http://www.gracelawn-cemetery.com/				
			Rule	es & Regulati	ions - Installation	Fee				
FLUSH, S	LANTS, BRONZE, MONUI	MENTS								
,	,									
FOUNDA [*]	TION FEE:									
	I.10 PSI - MINIMUM \$200.0	00								
	/MONUMENT - 1.30 PSI									
	,									
LOT & G	RAVE # NEEDS TO BE ON	I ROTTOM	PIGHT CO	DNED OF ST	ONE					
<u> </u>	CAVE # NEEDS TO BE ON	I BOTTOW	I KIOIII CO	KNEK OF ST	OIL.					
Notes: #	OF FULL BURIALS PER G	BRAVE: 1	# OF CREM	MAINS PER G	RAVE: 2					
										1
Installatio	on Fee Payable to: Check		Card_			Spring delivery begins (date):				
GRACEL/	AWN CEMETERY VIA	Phone				APRIL 16TH				
(SAME AS ABOVE) Fall/Winter Del		Fall/Winter Delivery "cutoff" (date):								
(SAIVE AS ABOVE)					OCTOBER 31ST					

GRAND LAWN

GRAND LAWN CEMETERY

(SAME ADDRESS AS ABOVE)

											_
Address	23501 GRAND RIVER AV	'ENUE				Form Required:	<u>FORM</u>	Yes	Х	No	
City	DETROIT	State	MI	Zip	48219	Grave Location R	equired on Memorial:	Yes		No	Х
Phone Fax	(313) 531-2050 (313) 531-2783					Symbol Required	on Memorial:	Yes		No	Х
Email	twood@grandlawnmi.com					If yes, what sym	bol?		,	•	,
Contact MMG	Tonya Wood	Phone	(313) 531-	2050		Benches Permitte	d: See note below	Yes	Х	No	
			Du	los & Dogulati	ons - Installation	Borders Required	on Foundation:	Yes		No	Х
			Ku	ies & ivegulati	ons - mstanation	1 66					
BRONZE	MUST BE MOUNTED ON	A GRANIT	E BASE, IN	CLUDING VA	MARKERS. IF TH	HEY INSIST ON CO	ONCRETE. IT IS THE	SAME	PRIC	E AS	
GRANITE	. ANY COLOR GRANITE I	BRONZE E	BASE IS AL	LOWED. 24Xx	12 BRONZE MEM	IORIALS. NO SLA	NTS OR BEVELS AL	LOWE	D. ONL	Υ.	
STEEL CA	AMEOS MAY BE INSTALL	ED ON FLU	JSH MARK	ERS. NO SING	SLE GRAVE MON	UMENTS. ALL MO	NUMENTS REQUIR	E 2 OR	MORE	Ē	
GRAVES	AND MUST MEET CEMET	ERY'S RE	QUIREMEN	NTS. 24x12x4	FLUSH MARKER	S ONLY IN SECTI	ONS Y, 30, 24 AND 2	25.			
	FEES:										
	Flagging Fee:	\$175.00 F	Payable to G	Grand Lawn Ce	metery						
	Setting Fee:	\$1.00 PSI	payable to	Inch Memorial	S						
	Foundation Fee:	\$1.00 PSI	Payable to	Grand Lawn C	Cemetery						
Sections \	7, 30, 24 and 25 we are no	longer acc	epting any	markers other	r then Flats (24x1)	2)					
1.00 PSI (OF BASE FOR MONUMEN	TS AND B	ENCHES			36"x 12"x 4" ALI	OWED FOR SINGLE	=			
MEMORIA	AL REMOVAL FEE: \$75.00)				2 MARKERS ALI	OWED PER GRAVE	_			
	LE GRAVE MONUMENTS		AMEOS ON	LY-NO SLAN	TS OR BEVELS						
						DIAL MEMODIAL IO	HOED)				
Notes: # O	F FULL BURIALS PER GRAV	/E:1 # OF	CREMAINS	PER GRAVE: 1(UNLESS A CREMO	KIAL MEMORIAL IS	USED)				
											
Installatio	on Fee Payable to:					Spring delivery b	egins (date): FLUS	H - AN	YTIME		

MONUMENTS & BENCHES - MARCH

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 15TH OR WEATHER PERMITTING

GREEN OAK PLAINS - (HOLDEN)

BRIGHTON, MI 48116

									-		
Address	MALTBY ROAD JUST EA	AST OF RIG	CKETT ROA	AD		Form Required:	Yes		No	Х	
City	BRIGHTON	State	MI	Zip	48116	Grave Location Required on Memorial:	Yes	Х	No		
Phone	(810) 231-1333					Symbol Required on Memorial:	Yes		No	Х	
Fax	(810) 231-5080					If yes, what symbol?			-		
Email	<pre>clerk@greenoaktwp.com</pre>					Benches Permitted:	Yes	Х	No		
Contact	DEANNA ROBSON	Phone	(810) 231-	-1333		Borders Required on Foundation:	Yes	Х	No		
	TOWNSHIP CLERKS DEPT					2" border required					
			Ru	les & Regulation	ons - Installation	Fee					
TOWNSH	IP TO DO THE FOUNDAT	TON. 24"	X 12" X 4" F	REQUIRES A 28	8" x 16" FOUNDA	TION = \$200.00					
FOUNDA [*]	<u>ΓΙΟΝ FEE:</u>										
28" X 16"	- \$200.00										
40" X 16"	- \$300.00										
48" X 16"	- \$400.00										
ODD SIZE	FOUNDATIONS .60 PSI										
CREMATI	ON BURIAL VAULT - \$275	5.00									
MEMORIA	ALS MUST HAVE 2" BOR	DER ON A	LL SIDES								
CALL CLE	RKS OFFICE BEFORE D	ELIVERY S	SO GRAVE	CAN BE STAK	ED. INSTALLATI	ON REQUIRES A					
GREEN C	AK TOWNSHIP EMPLOY	EE TO BE	PRESENT.								
Notes: #	OF FULL BURIALS PER GRA	AVE 1 # OI	F CREMAINS	S PER GRAVE: 2	OR 1 FULL AND 1	CREMATION PER GRAVE					
										1	
Installatio	on Fee Payable to: Cash &	& Checks	Accepted			Spring delivery begins (date):					
GREEN C	AK CHARTER TOWNSHI	Р				WEATHER PERMITTING					
10001 SIL	VER LAKE ROAD					Fall/Winter Delivery "cutoff" (date):					

WEATHER PERMITTING

GREENWOOD - BIRMINGHAM

WARREN, MI 48088

Address	OAK ST. WEST OF WOO	DWARD				Form Required:	Yes		No	Х
City	BIRMINGHAM	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone	(313) 567-3453					Symbol Required on Memorial:	Yes		No	Χ
Fax	(313) 567-8861					If yes, what symbol?			-	
Email	arcome02@gmail.com					Benches Permitted: Call for restrictions	Yes	Х	No	
Contact	CHERI ARCOME	Phone	(248) 928	-4094		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulations - In	stallation	Fee				
NEW SEC	CTION (F-NORTH) - FLUSI	H GRANIT	E ONLY. N	ONUMENTS, BEVELS	S, SLANTS	, ELSEWHERE.				
CEMETE	RY DOES FOUNDATIONS	AS NEED	ED. FOUN	DATION MUST BE IN	BEFORE I	DELIVERY.				
FOUNDA	TION FEE:									
24"x 12"x	4" FLUSH, 24"x12" BEVEL	S & SLAN	TS = \$250.	00						
36"x 12"x	4" AND 48"x 12"x 4" FLUS	H = \$350.0	00							
SLANTS	& BEVELS LARGER THAN	l 24"x 12" (ON SINGLE	GRAVE: FOUNDATIO	ON FEE = S	S125.00/LINEAR FOOT				
ALL FLUS	SH, SLANTS & BEVELS AF	RE TO BE I	DELIVERE	D TO ELMWOOD CEM	IETERY.					
MONUME	ENTS & BENCHES ARE TO	BE DELI	/ERED TO	GREENWOOD CEME	TERY.					
(2) 24"x	12" PER GRAVE MAX.									
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CRE	MAINS PER GRAVE: 3	OR 1 FU	LL AND 2 CREMAINS				
PE	R GRAVE BUT ADDITION	AL RIGHT	S OF BURI	AL WOULD NEED TO	BE PURC	HASED.				
Installatio	on Fee Payable to: <u>CITY</u>	OF BIRMIN	IGHAM			Spring delivery begins (date):				
Mail to:	CHERI ARCOME					APRIL 15TH				
	31356 NEWPORT DR.					Fall/Winter Delivery "cutoff" (date):				

NOVEMBER 15TH

GREENWOOD - FOWLERVILLE

213 S. GRAND AVENUE

FOWLERVILLE, MI 48836

										-	
Address	4350 CEMETERY ROAD (CI	EMETERY I	RD. & GRANE	O RIVER		Form Required: FO	<u>RM</u>	Yes	Χ	No	
City	FOWLERVILLE	State	MI	Zip	48836	Grave Location Requ	ired on Memorial:	Yes		No	Х
Phone	(517) 223-3771					Symbol Required on	Memorial:	Yes		No	Χ
Fax	(517) 223-7435					If yes, what symbol?				=	
Contact	CATHY ELLIOTT	Phone	(517) 749-2	2506		Benches Permitted:	See note below	Yes	Х	No	
CEMETER	RY SEXTON - EMAIL celliott@	@fowlerville	e.org			Borders Required on	Foundation:	Yes		No	Х
Contact	AMY PETRU, ADMIN Phone) (517) 223-	3771 Ext. 10	EMAIL apetru@	fowlerville.org						
			Rul	es & Regulation	ons - Installation	Fee					
FLUSH, BE	EVELS, SLANTS & UPRIGHT	MARKERS	ALLOWED.	FOUNDATION F	REQUIRED. MINIM	UM CHARGE = \$50.00					
FOUNDAT	ION CALCULATION (LENGT)	H IN INCHE	S + 2) x (WI	DTH IN INCHES	S + 2) x 30 x \$.03 = 0	COST OF FOUNDATION	N				
FOR EXA	AMPLE, A 24"x 12" FOUNDAT	TION WOUL	D COST \$32°	7.60 AND WOUL	LD MATCH A 24"x 1	12" BASE					
SECOND S	STONES ARE ALLOWED, BU	JT MUST BE	E A FLUSH M	OUNT. ON ANY	GRAVE, 1ST MAR	KER IS SET ON THE					
WALKWA	Y END AND ANY ADDITIONA	L STONE M	1UST BE FLU	SH MOUNT AT	THE OPPOSITE EN	ND OF THE GRAVE SIT	E.				
ALL MARK	ER NAMES MUST FACE THE	E ABUTTING	G WALKING I	PATH OR ROAD	WAY. NO STONE	WORK SHALL BE					
BROUGHT	INTO THE CEMETERY ON S	SATURDAY	OR SUNDAY	Y. NO FAMILY N	MONUMENT/MARKI	ER MAY SPAN MORE					
THAN 2 GI	RAVES. BENCHES ARE PER	RMITTED IF	THEY TAKE	THE PLACE OF	A MARKER.		8:00 AN	tery hou // to 9:00 hru Octo	0 PM		
MAXIMUM	FOR SINGLE GRAVE MARK	ER = 38" W	IDE					∕I to 6:00			
MAXIMUM	FOR DOUBLE GRAVE MARK	KER = NO E	SIGGER THAI	N 78" WIDE			Novemi	ber thru	April		
MAXIMUM	FOR BABYLAND GRAVE MA	4RKER = 18	3"x 10"								
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OI	F CREMAINS	PER GRAVE: 4	OR 1 FULL AND 2	2 CREMATION PER GRA	AVE				
Installatio	on Fee Payable to:					Due date for SPRING	G foundation req	uests:			
VILLAGE	OF FOWLERVILLE					MARCH 15TH					

Due date for FALL foundation requests:

SEPTEMBER 15TH

<u>GREENWOOD - HADLEY</u>

Address	4293 PRATT ROAD					Form Required:	Yes		No	Х
City	HADLEY	State	MI	Zip	48440	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 797-2117					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 797-6026					If yes, what symbol?				
Email	treasurer@hadleytownsh	nip.org				Benches Permitted:	Yes		No	Х
Contact	LISA SCHULTZ	Phone	(810) 834	1-9806		Borders Required on Foundation:	Yes	Х	No	
						2" border on actual size				
			Rı	ules & Regula	ations - Installatio	n Fee				
FOUNDA	TION FEE:									
.50 PSI										
Notes: #	OF FULL BURIALS PER GE	RAVF-1 # C	E CREMAIN	NS PER GRAVI	F·2 OR 1 FIII I AND	1 CREMAINS PER GRAVE				
110103. #	OF TOLE BOTTINEOT ER GI	VVL. 1 # C	OKEWAII	NOT EIR ORANGE	L. Z. OK TTOLE / KINE	T GIVENING I EIN GIVIVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	OOD CEMETERY					APRIL 1ST				
P.O. BOX						Fall/Winter Delivery "cutoff" (date):				
	MI 48440					DECEMBER 1ST				

GREENWOOD - VERNON

									1	
Address	W. WASHINGTON AVE.					Form Required:	Yes		No	Х
City	VERNON	State	MI	Zip	48476	Grave Location Required on Memorial:	Yes		No	Х
Phone	(989) 413-7785					Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A					If yes, what symbol?			7	
Email	jeffreyreed2015@gmail.co	<u>om</u>				Benches Permitted: See note below	Yes	Х	No	
Contact	JEFFREY REED	Phone	(989) 413	-7785		Borders Required on Foundation:	Yes		No	Χ
			Ru	ıles & Regulat	tions - Installation	n Fee				
CALL JE	FF REED FOR INDIVIDUA	L INSTALL	ATION FEE	ES.						
MEMORI	ALS HAVE TO BE INSTAL	LED BY C	EMETERY :	SEXTON.						
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAINS	S PER GRAVE: 2	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
	IN OLD SECTION - CREI	MATION B	URIAL WO	ULD HAVE TO	BE THE 2ND BU	RIAL				
Installati	on Fee Payable to:					Spring delivery begins (date):				
JEFFRE	/ REED					MAY 1ST OR WEATHER PERMITTIN	G			
P.O. BOX	(253, 6453 E. BENNINGT(ON RD.				Fall/Winter Delivery "cutoff" (date):				
VERNON	I, MI 48476					WEATHER PERMITTING				

GUARDIAN ANGEL

Address	4701 ROCHESTER RD.					Form Required: FORM	Yes	Χ	No	
City	ROCHESTER	State	MI	Zip	48306	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 601-2900					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 601-1711					If yes, what symbol?				
Email	mburnash@mtelliott.com					Benches Permitted:	Yes	Χ	No	
Contact	MOLLEE BURNASH	Phone	(248) 601-	2900		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulati	ions - Installation	Fee				
GRANITE	ONLY. MUST HAVE SAV	WN SIDES	•							
FOUNDA	TION FEE:									
24"x 12" -	\$350.00									
BABY 16'	x 8" - \$350.00									
MONUME	ENTS, BENCHES, AND CR	EMATION	MEMORIA	LS - \$600.00						
Notes: #	OF FULL BURIALS PER G	GRAVE: 1	# OF CREM	MAINS PER GF	RAVE: DEPENDS	ON LOCATION				
Installatio	on Fee Payable to: Ca	ash,Check	· &			Spring delivery begins (date):				
GUARDIA	AN ANGEL CEMETERY	CC VIA	PHONE			WEATHER PERMITTING				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

GUNNISONVILLE - DEWITT TOWNSHIP

Address	ess CORNER OF WOOD & CLARK RD.						Form Required: Yes No				
City	DEWITT, CLINTON CO.	State	MI	Zip	48820		Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 668-0270						Symbol Required on Memorial:	Yes		No	Χ
Fax	(517) 669-0277						If yes, what symbol?				
Email							Benches Permitted:		PLEAS	E CAL	<u></u>
Contact	CLERK	Phone	(517) 6	68-0270			Borders Required on Foundation:	Yes	Χ	No	
		Fax					2" border required				
			I	Rules & Re	gulations - In	stallation	Fee				
WEST OF	LANSING										
FOUNDA	TION FEE:										
.50 PSI											
ADD 2" A	ROUND FOR FOUNDATIO	ONS									
Notes:											
Installatio	on Fee Payable to:						Spring delivery begins (date):				
DEWITT	TOWNSHIP										
1401 W. I	HERBISON RD.						Fall/Winter Delivery "cutoff" (date):				
DEWITT,	MI 48820										

<u>HALSEY</u>

Address	dress WEST SIDE OF HALSEY RD. (OFF BALDWIN RD.)					Form Required:	Yes		No	Х
City	GRAND BLANC TWP	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 695-5166					Symbol Required on Memorial:	Yes		No	Х
Fax	(810)695-0893					If yes, what symbol?			-	
Email	N/A					Benches Permitted:	Yes	Χ	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 695- (810) 735-			Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulations - In	stallation	Fee				
FLUSH, S	LANTS, BEVELS & MONU	JMENTS								
FOUNDA [*]	ΓΙΟΝ FEE:									
.50 PSI, \$	150.00 MINIMUM									
Don Simo	ns - SEXTON									
10352 Ha	sey Rd									
Grand Bla	nc MI 48439-8323									
810-695-0	433									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN:	S PER GRAVE: 2 OR 1 F	-ULL AND 1	CREMATION PER GRAVE				
Installatio	n Fee Payable to:					Spring delivery begins (date):				
GENESE	VALLEY VAULT					WEATHER PERMITTING				
10510 N.	HOLLY RD.					Fall/Winter Delivery "cutoff" (date):				
HOLLY, M	II 48442					WEATHER PERMITTING				

HAMBURG CEMETERY

Address	STRAWBERRY LK. RD.					Form Required:	Yes		No	Х
City	HAMBURG	State	MI	Zip	48139	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 376-8993					Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?			•	
Email						Benches Permitted:	Yes	Х	No	
Contact	JULIE DURKIN SEXTON	Phone	(517) 376	5-8993		Borders Required on Foundation:	Yes		No	Х
			Rı	ıles & Regulati	ions - Installation	Fee				
CALL FOI	R PRICING									
Notes:										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	G TOWNSHIP									
	RRILL RD., PO BOX 157					Fall/Winter Delivery "cutoff" (date):				
	G, MI 48139									

HARTLAND TOWNSHIP

									-	
Address					Form Required:		Yes	1	No	Χ
City	HARTLAND	State	MI	Zip	Grave Location Require	ed on Memorial:	Yes	1	No	Χ
Phone	(248) 887-6700				Symbol Required on M	1emorial:	Yes	1	No [Χ
Fax	(248) 887-4487				If yes, what symbol?				_	
Email					Benches Permitted:	Call contact	Yes	1	No	
Contact	MIKE WILLENBERG	Phone	e (248) 887	-6700	Borders Required on F	oundation:	Yes	X	No	
НСМ	HURON CEMETERY MA	INTENANC	CE		2" bor	der on all sides				
			Ru	lles & Regulations - Insta	allation Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	IONUMENT	S - 36" MAX PER GRAVI	E					
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	<u> 60.00</u>						
FLUSH SI	ETTING OF GRANITE & E	BRONZE O	N GRANITI	E (NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BRO	ONZE ON (CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MINIM	MUM \$250.	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	ES THAN MONUMENT BA	ASE.					
ADD 4" TO	O LENGTH AND WIDTH (OF BASE T	O DETERM	MINE FOUNDATION SIZE	NEEDED.					
ADD \$50.0	00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
CORNER	MARKERS (SET OF 4)	\$125.00								
VASE ON	LY	\$100.00	(ADD \$50.	.00 FOR ALL FEES FOR E	BUILT IN VASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BURIALS PER G	RAVE: 2-3					
(C.	ALL MIKE @ HURON CEI	METERY M	<u>IAINTENAN</u>	ICE FIRST)					_	
Installatio	on Fee Pavable to:	CASH, CI	HECK		Spring delivery begin	ns (date):				

HURON CEMETERY MAINTENANCE <u>CC VIA PHONE</u>
P.O. BOX 112
HIGHLAND, MI 48357

Spring delivery begins (date):	
WEATHER PERMITTING	
Fall/Winter Delivery "cutoff" (date):	
WEATHER PERMITTING	

HEBREW MEMORIAL PARK

Address	21503 E. 14 MILE RD.					Form Required: FORM	Yes	Χ	No		
City	CLINTON TWP.	State	MI	Zip	48035	Grave Location Required on Memorial:	Yes		No	Х	
Phone	(248) 543-1622					Symbol Required on Memorial:	Yes		No	Χ	
Fax	(586) 790-4115					If yes, what symbol? * See below					
Email	tila@hebrewmemorial.org					Benches Permitted:	Yes		No	Χ	
Contact	TILA ELAINE KLEIN - CHAPEL	Phone OFFICE (2	(248) 543- 248) 543-16			Borders Required on Foundation:	Yes		No	Χ	
		<u> </u>	Rul	es & Regulati	ions - Installation	Fee					
PERMIT F	IT REQUIRED FOR DELIVERY. GRANITE OR BRONZE. NO RESTRICTIONS IN OLD SECTION. 18" MAX										
SLANTS I	N SECTIONS 14, 12, 10 A	ND LAKES	IDE.								
SECTION	ECTION 15,16,17 & 18 ALLOWS SLANTS OR SMALL MONUMENTS										
2 lines of	HEBREW, NAME AND DA	ATE OF DE	ATH MUST	BE ON MEM	IORIAL.						
SMALL M	ONUMENT:										
	TABLET 20"x 8"x up to 28	,"									
	BASE 28"x 12"x 8" SAWN	FRONT, F	ROCK SIDE	S							
SLANT MA	ARKER:										
	MARKER 24"x 10"x 18"										
	BASE 28"x 12"x 8" SAWN	FRONT, F	ROCK SIDE	S							
300.00 ON	ALL SINGLE FOUNDATION	ONS INCLI	JDES PER	MIT FEE							
500.00 ON	ALL DOUBLE FOUNDAT	IONS INCL	UDES PER	RMIT FEE							
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CREM	MAINS PER G	RAVE: 0						
	on Foo Develor to					Consistent delivered have (deta).				·	

Installation Fee Payable to:
HEBREW MEMORIAL CHAPEL
26640 GREENFIELD
OAK PARK, MI 48237

Spring delivery begins (date):

NO CUTOFF - VERIFY FOUNDATION IS IN BEFORE DELIVERY

Fall/Winter Delivery "cutoff" (date):

NO CUTOFF - VERIFY FOUNDATION IS IN BEFORE DELIVERY

HIGHLAND

P.O. BOX 112

HIGHLAND, MI 48357

										1	\ \ \
	561 N. Milford Rd.					Form Required:		Yes		No	Х
City	HIGHLAND	State	MI	Zip	48357	Grave Location Requir	ed on Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on M	lemorial:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?					
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG	Phone	(248) 887	-6700		Borders Required on F	oundation:	Yes	Х	No	
HCM	HURON CEMETERY MA	INTENANO	E			2" bor	der on all sides			_	
			Ru	les & Regulat	ions - Installation	Fee					
BRONZE,	, FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX F	PER GRAVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	0.00							
FLUSH S	ETTING OF GRANITE & E	RONZE O	N GRANITE	E (NO FOUND	ATION)						
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA	TION FEE FOR MONUME	NTS & BRO	ONZE ON (CONCRETE (N	ION VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00								
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MON	IUMENT BASE.						
ADD 4" T	O LENGTH AND WIDTH (OF BASE T	O DETERM	IINE FOUNDA	TION SIZE NEEDI	ED.					
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	LY	\$100.00	(ADD \$50.	.00 FOR ALL F	EES FOR BUILT I	N VASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BURI	ALS PER GRAVE:	2-3					
(C	ALL MIKE @ HURON CE	METERY M	AINTENAN	ICE FIRST)							
Installatio	on Fee Payable to:	CASH, CH	<u>IECK</u>			Spring delivery begin	ns (date):				
HURON (CEMETERY MAINTENANO	CE CC V	A PHONE			WEATHER PERMITTI	NG				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

HIGHLAND/WEST

P.O. BOX 112

HIGHLAND, MI 48357

								[1	
Address	E. SIDE OF S. HICKORY R	.IDGE RD. 1	MI.S. OF M	59		Form Required:		Yes		No	X
City	HIGHLAND	State	MI	Zip		Grave Location Require	ed on Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on M	emorial:	Yes		No	Х
Fax	(248) 887-4487					If yes, what symbol?				-	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @	Phon	e (248) 887	-6700		Borders Required on Fe	oundation:	Yes	Χ	No	
HCM	HURON CEMETERY MA	AINTENAN	CE			2" bord	der on all sides			_	
			Ru	ıles & Regulations - Ins	stallation	Fee					
BRONZE	, FLUSH GRANITE, SLAN	TS, AND N	MONUMENT	S - 36" MAX PER GRA	VE						
GOVERN	MENT ISSUED MARKER	S - ALL TY	PES\$25	<u> </u>							
FLUSH S	ETTING OF GRANITE & E	3RONZE C	N GRANITI	E (NO FOUNDATION)							
\$0.50 PS	I, MINIMUM \$175.00										
FOUNDA	TION FEE FOR MONUME	ENTS & BR	ONZE ON (CONCRETE (NON VA)							
\$0.70 PS	OF FOUNDATION, MINII	MUM \$250	.00								
ALL FOU	NDATIONS MUST BE 2" L	_ARGER O	N ALL SIDE	ES THAN MONUMENT I	BASE.						
ADD 4" T	O LENGTH AND WIDTH (OF BASE T	O DETERN	MINE FOUNDATION SIZ	ZE NEEDE	D.					
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	ILY	\$100.00	0 (ADD \$50	.00 FOR ALL FEES FOR	R BUILT II	N VASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BURIALS PER	R GRAVE:	2-4					
(C	ALL MIKE @ HURON CE	METERY N	MAINTENAN	NCE FIRST)							
Installation	on Fee Payable to:	CASH, C	HECK			Spring delivery begin	s (date):		_		
HURON (CEMETERY MAINTENAN	CE CC V	/IA PHONE			WEATHER PERMITTII	NG				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

HIGHLAND - YPSILANTI

Address	943 NORTH RIVER STRE	EET				Form Required: FORM	Yes	Χ	No					
City	YPSILANTI	State	MI	Zip	48198	Grave Location Required on Memorial:	Yes		No	Х				
Phone	(734) 482-9490					Symbol Required on Memorial:	Yes		No	Χ				
Fax	N/A					If yes, what symbol?			-					
Email	tina@highlandcemeteryyp	si.com	TINA KALU	JSHA		Benches Permitted: Call first	Yes	Х	No					
Contact	DAVE DeLAURA	Phone	(734) 482-	-9490		Designated areas only	,		-					
	GROUNDS SUPERINTEND	ENT - (734)	678-9867			1" Border Required on Foundation:	Yes	Χ	No					
			Ru	les & Regulati	ions - Installation	Fee								
FOUNDA [*]	TION FEE:													
.60 PSI. (COST CALCULATED BY B	ASE SIZE	OF MONUI	MENT. DO NO	OT ROUND TO NE	EAREST DOLLAR.								
EXAMPLE	E - 24" x 12" = 288 TOTAL	SQUARE I	NCHES x .6	60 = \$172.80										
MAX 36" S	SINGLE SINGLE & DO			OVER THA	ON GRAVESIT	N BE MADE ON ES (2) CONTACT FIRST								
										1				
	on Fee Payable to:					Spring delivery begins (date):								
	D CEMETERY ASSOCIAT	ION				APPROXIMATELY APRIL 25TH								
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):								
						APPROXIMATELY NOVEMBER 1ST	APPROXIMATELY NOVEMBER 1ST							

HILLSIDE - BELLEVILLE

BELLEVILLE, MI 48111

Address	46785 DENTON ROAD					Form Required: FORM	Yes	X	No	
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 697-9323 EXT 7010					Symbol Required on Memorial:	Yes		No	X
Fax	(734) 697-6837					If yes, what symbol?				
Email	clerk@belleville.mi.us					Benches Permitted:	Yes	Х	No	
Contact	SHERRI SCHARF	Phone	(734) 697-	9323		Borders Required on Foundation:	Yes	Х	No	
						*See note below for spec	ificatio	ns		
			Rul	les & Regulat	ions - Installation	Fee				
FLUSH, E	BEVELS, SLANTS AND MO	NUMENT	3			Cash, Check and Credit Card in office				
30" MAX	FOR SINGLE									
FOUNDA	TION FEE: 1.00 PSI									
*2" BORD	ER REQUIRED ON ALL FO	OUNDATIO	ONS LARGE	ER THAN 30"x	: 12"					
Cash Che	eck and Credit Card in office	Δ.								
	fall foundation order on F		auet 23rd							
			_	ATION DUDL	N C DED CDAVE.	4				
Notes: #	OF FULL BURIALS PER C	JKAVE I F	OF CREIN	ATION DUKIA	ALS FER GRAVE:	*				
In otalisti	on Eas Dayable to: Cash/C	Shook 9 C	C in office			Spring delivery begins (deta):				
	on Fee Payable to: Cash/C					Spring delivery begins (date):	1			
	BELLEVILLE - ATTN: SHEF 	KKI SCHA	KF			WEATHER PERMITTING Usually May	or Jun	е		
6 MAIN S	TREET					Fall/Winter Delivery "cutoff" (date):				

WEATHER PERMITTING Usually October

HILLSIDE - ST. CLAIR

Address	CORNER OF PALMER	& ST. CLAII	R HWY			Form Required:	Yes		No	Х
City	ST. CLAIR	State	MI	Zip	48079	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 329-7121					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 329-7997					If yes, what symbol?				
Email						Benches Permitted: Prior approval	Yes	Х	No	
Contact	ANNETTE STURDY	Phone				Borders Required on Foundation:	Yes		No	Х
				Rules & Reg	gulations - Installat	ion Fee				
FLUSH, E	EVELS, SLANTS AND M	ONUMENT	S							
FOUNDA	TION FEE:									
\$12/CUBI	 C FOOT - \$120.00 MINIM	1UM								
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF C	REMAINS PI	ER GRAVE: 2					
										1
	on Fee Payable to:					Spring delivery begins (date):				
	ST. CLAIR					MAY 1ST				
547 N. CA	ARNEY DR.					Fall/Winter Delivery "cutoff" (date):				
ST. CLAIF	R, MI 48079					SEPTEMBER 1ST				

HILLVIEW MEMORIAL GARDENS

Address	8900 ANDERSONVIL	LE RD.				Form Required:	Yes	No	Χ
City	CLARKSTON	State	MI	Zip	48016	Grave Location Required on Memorial:	Yes	No	Χ
Phone	(810) 623-7705					Symbol Required on Memorial:	Yes	No	Χ
Fax	(810) 623-7742					If yes, what symbol?			
Email						Benches Permitted:	Yes	No	Χ
Contact	OFFICE					Borders Required on Foundation:	Yes	No	Χ
				Rules & Reg	julations - Installa	ation Fee			
FLUSH O	NLY								
FOUNDA	TION FEE:								
24"x 12"x	4" - (LARGEST # x 1.5	50 PSI)							
EXAMPL	E - 24 x 12 x 1.50 = \$43	32.00							
CALL FO	R CEMETERY FEES								
Notes: #	OF FULL BURIALS PER	GRAVE: #0	OF CREM	MAINS PER GRA	AVE: OR FULL A	ND CREMATION PER GRAVE			
Installatio	on Fee Payable to: HI	LLVIEW MEN	MORIAL			Spring delivery begins (date):			
MAIL TO:	C/O COVENANT CE	METERY SE	RVICES			WEATHER PERMITTING			
	6180 DIXIE HWY					Fall/Winter Delivery "cutoff" (date):			
	CLARKSTON ML483	346				WEATHER PERMITTING			

HISTORIC WOODLAWN

Address	1502 W. CENTRAL AVE	ENUE				Form Required:	Yes	No	Χ
City	TOLEDO	State	ОН	Zip	43606	Grave Location Required on Memorial:	Yes	No	Χ
Phone	(419) 472-2186					Symbol Required on Memorial:	Yes	No	Χ
Fax						If yes, what symbol?			
Email						Benches Permitted: Call for approval	Yes	No	
Contact	KRISTA WERNER	Email	krista.	werner@historic-w	voodlawn.com	Borders Required on Foundation:	Yes	No	Χ
				Rules & Regulat	ions - Installatio	n Fee			
GARDEN	8 - BRONZE MARKER C	NLY							
SECTION	6 - SLANT MARKER ON	ILY							
SECTION	8B - 24x12x4 GRAY MA	RKER ONL	Y						
SECTION	8A - FLAT MARKER ON	ILY							
23V - VET	ERAN BRONZE ONLY								
INSTALL	ATION FEES:								
SINGLE F	LAT - \$300.00								
VETERAN	۱ - \$300.00								
SINGLE S	SLANT - \$350.00								
24" MONU	JMENT - \$350.00								
36" MONU	JMENT OR SLANT - \$40	0.00							
Notes: #	OF FULL BURIALS PER	GRAVE:	# OF CF	REMAINS PER GF	RAVE:				
									
Installatio	on Fee Payable to:					Spring delivery begins (date):			
						Fall/Winter Delivery "cutoff" (date):			
1						i an winter betwery cuton (date):			

<u>HODGE</u>

HIGHLAND, MI 48357

									-			
Address	ON FENTON RD., JUST	NORTH O	F CLYDE F	RD.	Form Required:		Yes		No	Х		
City	HARTLAND	State	MI	Zip	Grave Location Requir	ed on Memorial:	Yes		No	Х		
Phone	(248) 887-6700				Symbol Required on M	lemorial:	Yes		No	Х		
Fax	(248) 887-4487				If yes, what symbol?				_			
Email					Benches Permitted:	Call contact	Yes		No			
Contact	MIKE WILLENBERG		e (248) 887	7-6700	Borders Required on F	oundation:	Yes	Х	No			
НСМ	HURON CEMETERY MA	AINTENAN	CE		2" bor	der on all sides						
			Ru	ıles & Regulations - Inst	allation Fee							
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMEN	ΓS - 36" MAX PER GRAV	E							
GOVERN	MENT ISSUED MARKERS	S - ALL TY	PES\$2	<u>50.00</u>		TALK TO						
FLUSH S	ETTING OF GRANITE & E	BRONZE O	N GRANIT	E (NO FOUNDATION)		LARRY AT						
\$0.50 PSI	, MINIMUM \$175.00					TOWNSH	IIP:					
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BR	ONZE ON	CONCRETE (NON VA)		810-632-7	7498					
\$0.70 PSI	OF FOUNDATION, MININ	MUM \$250.	00									
ALL FOUI	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDI	ES THAN MONUMENT B	ASE.							
ADD 4" To	O LENGTH AND WIDTH (OF BASE T	O DETERM	MINE FOUNDATION SIZE	NEEDED.							
ADD \$50.	00 FOR BUILT IN VASE											
MISCELL	ANEOUS ITEMS											
CORNER	MARKERS (SET OF 4)	\$125.00										
VASE ON	LY	\$100.00	(ADD \$50	.00 FOR ALL FEES FOR	BUILT IN VASE)							
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BURIALS PER (GRAVE: 2-3							
(C	ALL MIKE @ HURON CE	METERY N	IAINTENAI	NCE FIRST)								
_												
Installatio	on Fee Payable to:	CASH, C	HECK		Spring delivery begir	ıs (date):						
HURON (EMETERY MAINTENANG	CE <u>CC V</u>	IA PHONE		WEATHER PERMITTI	NG						
P.O. BOX	112				Fall/Winter Delivery "cutoff" (date):							

WEATHER PERMITTING

HOLY CROSS

18303 ALLEN RD.

BROWNSTOWN, MI 48193

									_	
Address	8850 DIX AVENUE					Form Required: FORM	Yes	Х	No	
City	DETROIT	State	MI	Zip	48209	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 285-2155					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 285-6510					If yes, what symbol?	— ,		7	
Email	mariles.lori@aodcemeteri	es.org				Benches Permitted:	Yes	Х	No	
Contact	LORI MARILES	Phone	(734) 285	5-2155		Borders Required on Foundation:	Yes		No	Χ
			Rı	ules & Regulat	tions - Installation	Fee				
ONLY GR	ANITE MARKERS ALLOW	/ED. MUS	T BE APPI	ROVED BY CE	METERY. 24"x 12	" or 48"x 12"				
16"x 10"x	4" - \$300.00 INFANT									
24"x 12"x	4" - \$475.00									
48"x 12"x	4" - \$630.00									
MONUME	NTS - WITH PRIOR APPE	ROVAL AN	D ADDITIO	ONAL LOT UP	GRADE FEE:					
BASE 24"	x 12" - \$500.00									
BASE 48"	x 14" - \$1,000.00									
BASE 60"	x 14" - \$1,250.00									
BASE 66"	x 14" - \$1,375.00									
Notes: #	OF FULL BURIALS PER (RAVF: 1	# OF FUI	I BURIAIS PE	FR DOUBLE DEPT	H GRAVE: 2				
	OF CREMAINS PER GRAV		# OI TOL	L BONIALOT L	IN DOODLE DET T	TORAVE. 2				
# \	OF CICLIMAINS FER GRAV	/L. J								
Installatio	on Fee Payable to: <u>HOLY</u>	CROSS C	<u>EMETERY</u>			Spring delivery begins (date):				
	OUR LADY OF HOPE					APRIL 1ST				

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST

HOLY SEPULCHRE

Address	25800 W. TEN MILE RD.					Form Required: FORM	Yes	Χ	No	
City	SOUTHFIELD	State	MI	Zip	48033	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 350-1900					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 350-1737					If yes, what symbol?			-	
Email	oconnor.colleen@aod.org					Benches Permitted:	Yes	Х	No	
Contact	COLLEEN O'CONNOR	Phone	(248) 350	-1900		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulati	ions - Installation	Fee				
GRANITE	MARKERS AND MONUM	ENTS ONL		•		LOWED ON 1 GRAVE. SECTION 37 IS	3			
MONUME	NTS MONUMENTS 2 GR	AVES: 3'x	8"x 2'4", 4'>	(1'2"x 8". 4 GF	RAVES: 4'x 8"x 2'4	", 5'x 1'2"x 8".				
MONUME	NTS IN OTHER SECTION	S: NO TA	LLER THAI	N 7' AND MUS	T BE APPROVED	BY CEMETERY.				
STAINLES	SS STEEL AND LASER PH	IOTOS AL	LOWED. N	IO SLANTS, H	ALF LEDGERS O	R FULL LEDGERS ALLOWED. 2 SINGL	E MAR	RKERS		
ALLOWE	O ON 1 GRAVE. MONUME	NT AND D	ESIGN NE	ED PRIOR AP	PROVAL FROM	CEMETERY.				
16"x 10"x	4" - \$300.00 INFANT									
24"x 12"x	4" - \$475.00									
48"x 12"x	4" - \$630.00			SETTING FE	E IS DUE 2 WEEK	(S PRIOR TO MARKER DELIVERY				
BENCH F	OUNDATION - \$1050.00			WILL ONLY ACC	CEPT FULL PAYMEN	T ON MARKERS AND MONUMENTS.				
SINGLE N	MONUMENT - \$350.00									
2 GRAVE	MONUMENT - \$525.00									
4 GRAVE	MONUMENT - \$700.00									
MONUME	NTS GREATER THAN TH	AN 5' - \$17	75.00 PER	LINEAR FOOT	-					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MAINS PER G	SRAVE: 2					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
HOLY SE	PULCHRE CEMETERY					APRIL 1ST				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				

NOVEMBER 1ST

HOWELL MEMORIAL CEMETERY

Address	1410 WEST HIGHLAND I	RD.				Form Required:	Yes		No	Х
City	HOWELL	State	MI	Zip	48843	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 546-4500					Symbol Required on Memorial:	Yes		No	Χ
Fax	(517) 546-6019					If yes, what symbol?			Ī	
Email	dwylie@cityofhowell.org					Benches Permitted:	Yes	Х	No	
Contact	DAVE WYLIE	Cell 517 4	04 2526			Borders Required on Foundation:	Yes		No	Χ
		Office 517	546 4500							
			Ru	ıles & Regulat	ions - Installatior	Fee				
GRANITE	OR BRONZE. FLUSH, BI	EVELS, SL	ANTS ANI	O MONUMENT	S SHALL NOT BE	SMALLER THAN				
16"x 8" IN	BASE SIZE NOR SHALL	THEY EXC	CEED 40" II	N LENGTH FO	R SINGLE BURIA	_ SPACE,				
90" IN LE	NGTH FOR DOUBLE SPA	CE AND 1	8" IN WIDT	Ή.						
FOUNDA	TION FEE:									
.40 PSI, N	//INIMUM \$70.00									
Notes: "	OF FULL BURNALO DED O		" OF ODE	MAINO DED O	ND AN / E + O					
Notes: #	OF FULL BURIALS PER (SKAVE: 1	# OF CRE	MAINS PER G	RAVE: 2					
Inetallatia	on Fee Payable to:					Spring delivery begins (date):				
	-	<i>l</i> ulio								
	HOWELL - ATTN: Dave W	<i>i</i> yiie				VARIES - PLEASE CALL				
	GRAND RIVER					Fall/Winter Delivery "cutoff" (date):				
IHOWELL	, MI 48843					VARIES - PLEASE CALL				

HURON VALLEY

									r	
Address	P.O. BOX 1021-HURON RIV	√ER DR. W.	. OF TELEG	3RAPH		Form Required:	Yes	ı	No	Х
City	FLAT ROCK	State	MI	Zip	48134	Grave Location Required on Memorial:	Yes	ı	No	Х
Phone	(734) 782-9415					Symbol Required on Memorial:	Yes	I	No	Х
Fax	N/A					If yes, what symbol?				
Email						Benches Permitted:	Yes	X 1	No	
Contact		Phone	(734) 782	2-9415		Borders Required on Foundation:	Yes		No	Х
			R	ules & Regula	tions - Installatior	ı Fee				
FLUSH, E	BEVELS, SLANTS AND MO	ONUMENT:	S							
FOUNDA	TION FEE:									
1.00 PSI -	- ANY SIZE									
24"x 12" -	\$288.00									
Noton # /	OF FULL BURIALS PER GRA	۸\/ ـ .	COEMAIN	IC DED CDAVE.	2.00.4.5111.4.410.4	CDEMATION DED CDAVE				
NOIES. #	OF FULL BURIALS PER GRA	<u>(VE. 1 # OF</u>	- CREWAIN	S PER GRAVE.	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
DARIN M	-					WEATHER PERMITTING				
	EST HURON RIVER DR.									
						Fall/Winter Delivery "cutoff" (date):				
IFLAT RO	CK, MI 48134					WEATHER PERMITTING				

KENSINGTON

HIGHLAND, MI 48357

									1		
Address	GRAND RIVER & KENSI	NGTON RI) .		Form Required:		Yes		No	Х	
City	KENT LAKE	State	MI	Zip	Grave Location R	equired on Memorial:	Yes		No	Х	
Phone	(248) 887-6700				Symbol Required	on Memorial:	Yes		No	Χ	
Fax	(248) 887-4487				If yes, what sym	bol?			_		
Email					Benches Permitte	d: Call contact	Yes		No		
Contact	MIKE WILLENBERG		2 (248) 887-	6700	Borders Required	on Foundation:	Yes	Х	No		
НСМ	HURON CEMETERY MA	INTENANC	CE		2	" border on all sides					
			Ru	les & Regulations - Install	ation Fee						
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX PER GRAVE							
GOVERN	MENT ISSUED MARKERS	3 - ALL TYF	PES\$25	0.00							
FLUSH S	LUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)										
\$0.50 PSI	0.50 PSI, MINIMUM \$175.00										
FOUNDA [®]	TION FEE FOR MONUME	NTS & BR	ONZE ON C	CONCRETE (NON VA)							
\$0.70 PSI	OF FOUNDATION, MININ	ЛUM \$250. [,]	00								
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT BAS	E.						
ADD 4" T	O LENGTH AND WIDTH C	OF BASE T	O DETERM	INE FOUNDATION SIZE N	IEEDED.						
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FOR BU	JILT IN VASE)						
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREM	MATION BURIALS PER GR	AVE: 2						
(C	ALL MIKE @ HURON CEN	METERY N	IAINTENAN	CE FIRST)							
Installatio	on Fee Payable to:	CASH, Ch	HECK		Spring delivery l	egins (date):					
HURON (EMETERY MAINTENANC	CE <u>CC V</u>	IA PHONE		WEATHER PERM	IITTING					
P.O. BOX	D. BOX 112 Fall/Winter Delivery "cutoff" (date):										

WEATHER PERMITTING

KINNEY

Address	VINCENT RD.					Form Required:	Yes		No	Х
City	NORTH STREET	State	MI	Zip	48049	Grave Location Required on Memorial:	Yes	Х	No	
Phone	(810) 985-7258					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 985-3065					If yes, what symbol?			_	
Contact	KATHLEEN TURNER (CLERK)		Phone	(810) 385-161	16	Benches Permitted:	Yes		No	Χ
	DAN JERSTENBERGER (SEX	ΓΟΝ)	Phone	(810) 531-161	19	Borders Required on Foundation:	Yes	Χ	No	
	ERNIE MANOLEAS (SUPERVIS	OR)	Phone	(810) 941-425	54	2" border required (included in p	rice)		_	
	CATHY JOWETT (SECRETAR	Y)	Email	cathyj@clydet	townshipscc.org					
			Rı	ıles & Regulati	ions - Installatior	n Fee				
FLUSH, B	EVELS, SLANTS AND MO	NUMENT	3.							
FOUNDA	TION FEE:									
.50 PSI, M	IINIMUM \$120.00 FOR UF	TO 10" x 2	24"							
24"x 12" -	\$144.00									
Only one	(1) monument, marker, or	memorial s	hall be peri	mitted per buria	l space "above gr	ade" Any other military				
or such m	arker must be flush or belo	w grade.								
IF A HEA	OSTONE SHOWS UP WIT	HOUT A F	OUNDATIO	ON A \$500 FIN	NE WILL BE ISSU	JED!				
Notes: #	OF FULL BURIALS PER GR	Δ\/F·1 # Ω	E CREMAIN	IS DER GRAVE:	AOR 1 FULL AND	1 CREMATION PER GRAVE				
itotes. π	OF TOLL BONIALOT EN ON	- VL. 1 # O	I OKLIVIAII	OT EN ONAVE.	4 OK 11 OLL AND	TOKEWATION FER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date): April 1	5			
CLYDE T	OWNSHIP					WEATHER PERMITTING				
3350 VIN	CENT ROAD						lov 15			
	TREET. MI 48049					WEATHER PERMITTING				

KNOLLWOOD MEMORIAL PARK

Address	1299 RIDGE RD.					Forms Required: FORMS	Yes	X	No	
City	CANTON	State	MI	Zip	48187	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 495-0400					Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 495-1290					If yes, what symbol?			_	
Email	knollwoodmemorial@gma	ail.com				Benches Permitted: Designated areas	Yes	Х	No	
Contact	DENNIS HERMAN	Phone	(734) 495-	-0400		Borders Required on Foundation:	Yes	Χ	No	
	Denise					2" border require	d			
			Ru	les & Regulat	ions - Installatio	n Fee				
GRANITE	AND BRONZE. BRONZE	MUST BE	MOUNTED	ON GRANITI	E BEFORE DELI	VERY TO CEMETERY.				
ANY COL	OR GRANITE BRONZE B	ASE ALLO	WED							
NO BEVE	LS OR SLANTS.					CALL BRAD BOUCHIE (734) 274-7422				
INSTALL	ATION FEES:					FOR FOUNDATIONS				
24"x 12" <i>F</i>	 AND 24"x 14" - \$350.00 GF	RANITE								
ALL COM	PANIONS - \$700.00									
MINIMUM	I SINGLE 24"x 12", MINIM	UM COMP	ANION 36"x	13". DOUBLI	E INTERMENT 10	6"x 24". BRONZE				
MARKER	S, GRANITE MONUMENT	S AND BE	NCHES NE	ED APPROVA	L.	PET MEMORIA	LS NO			
CALL CEI	METERY FOR CERTAIN F	RESTRICTI	ONS.			10"x 4" - \$225.0 12"x 6" - \$250.0	00			
LEDGER	S, BENCHES, MONUMEN	T - \$1.00 P	SI			16"x 8" - \$275.0 20"x 10" - \$300	00 .00			
	SECTION - \$375.00	·				24"x 10" - \$325	.00			
16"x 4"x 1		USE BEN	ICH BASE	AS FOUNDAT	ION					
24"x 8"x 4		CAN BE	ROCK SIDE	ES OR SAWN	SIDES					
	OR # OF FULL BURIALS					ALL OFFICE				
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begins (date):				

P.O. BOX 87979 3% FEE ADDED ON CREDIT CARD CANTON, MI 48187 TRANSACTIONS

CC VIA PHONE

KNOLLWOOD MEMORIAL PARK

Spring delivery begins (date):
WEATHER PERMITTING
Fall/Winter Delivery "cutoff" (date):
WEATHER PERMITTING ON GROUND FROZEN

LAKESIDE - HOLLY

									-	
Address	860 THOMAS ST.					Form Required:	Yes		No	Χ
City	HOLLY	State	MI	Zip	48442	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 807-1447					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 531-2203					If yes, what symbol?			=	
Email						Benches Permitted:	Yes	Х	No	
Contact		Phone	(248) 807-	-1447		Borders Required on Foundation:	Yes	Х	No	
						2" border required	1			
			Ru	les & Regulat	ions - Installatior	n Fee				
FLUSH, E	BEVELS, SLANTS AND MO	ONUMENT:	S							
FOUNDA	TION FEE:									
.50 PSI, N	//INIMUM \$150.00									
INFANT -	\$150.00									
24"x 12"x	4" - \$150.00									
VA BRON	IZE - \$150.00									
	·									
Notes: #	OF FULL BUIDIALS DED GD	۸\/E:1 # C	NE ODEMAIN!	S DED GDAVE	2 OP 1 FULL AND	1 CREMATION PER GRAVE				
140103. π	OF TOLL BURNALOT LICON	AVE. 1 # C	ORLINAIN.	OT LIC ORAVE.	2 OK 11 OLL AND	TOREMATION FER GRAVE				<u> </u>
Installatio	on Fee Payable to:					Spring delivery begins (date):				
VILLAGE	OF HOLLY - DPW	(248) 634	l-2202			APRIL 1ST				
201 ELM	STREET					Fall/Winter Delivery "cutoff" (date):				
HOLLY	/II 48442					NOVEMER 15TH				

LAKESIDE - MARION

Address	BURKHART & NORTON					Form Required:	Yes		No	Х
City	MARION	State	MI	Zip	48843	Grave Location Required on Memorial:	Yes		No	Х
Phone						Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A					If yes, what symbol?				
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	TOM LLOYD	Phone	(517) 230-	2722		Borders Required on Foundation:	Yes	Х	No	
						2" border required				
			Rul	es & Regulat	ions - Installation	Fee				
FOUNDA	TION FEE: .40 PSI, \$75.00	NINIMUM	Л							
Notos: #	OF FULL BURIALS PER GRA	\\/E:1 # O	E ODEMAINS	DED CDAVE	4 OD 4 EULL AND 2	CDEMAINS DED CDAVE				
Notes. #	OF FULL BURIALS FER GRA	AVE. 1 # O	CREWAINS	PER GRAVE.	4 OK 1 FULL AND 3	CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
TOM LLO	-					MAY 1ST OR (WEATHER PERMITTIN	G)			
	RMANN DR.					Fall/Winter Delivery "cutoff" (date):	<i>G</i>)			
BO LINE C	ITY, MI 49712					WEATHER PERMITTING				

LAKESIDE - PORT HURON

100 McMORRAN BLVD. PORT HURON, MI 48060

Address	3663 10TH AVENUE					Form Required:	Yes	N	10	Χ
City	PORT HURON	State	MI	Zip	48060	Grave Location Required on Memorial:	Yes	N	10	Χ
Phone	(810) 984-9725					Symbol Required on Memorial:	Yes	N	10	Χ
Fax	(810) 982-7872					If yes, what symbol?				
Email	kristont@porthuron.org					Benches Permitted:	Yes	N	10	Χ
Contact	TOM KRISTON Elizabeth	Phone	(810) 98	7-6000		Borders Required on Foundation:	Yes	\	10	Х
			R	ules & Regi	ulations - Install	ation Fee				
FLUSH, B	EVELS, SLANTS AND MC	ONUMENT:	S.							
ALL MEM	ORIALS AND MONUMEN	TS MUST I	HAVE CE	METERY AP	PROVAL.					
FOUNDA	TION FEE:									
.60 PSI, \$	160.00 MINIMUM									
MARKERS										
SINGLE	LENGTH NO MORE THA	AN 30" - WI	DTH NO N	MORE THAN	N 12" - HEIGHT N	O MORE THAN 30"				
DOUBLE	LENGTH NO MORE THA	AN 60" - WI	DTH NO N	MORE THAN	N 12" - HEIGHT N	O MORE THAN 30"				
FLUSH	LENGTH 24" OR LESS -	WIDTH 12	" OR LES	S - FLUSH F	HEIGHT					
BABYLAN	D SECTION - LENGTH 16"	OR LESS	- WIDTH 8	B" OR LESS	- FLUSH HEIGH	Г				
VETERAN	S' SECTION - LENGTH ANI	D WIDTH I	DETERMIN	NED BY U.S	. GOVT FLUSH	I HEIGHT				
BASES F	OR SINGLE AND DOUBL	E MARKEI	RS - NO M	ORE THAN	8" HIGH AND 14	" WIDE				
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # 0	OF CREMA	INS PER GR	AVE: 4					
(OR 1 FULL AND 2 CREMATIO	ONS PER G	RAVE							
 Installatio	on Fee Payable to:					Spring delivery begins (date):				
	PORT HURON - CITY CLE	FRK'S OFF	ICE			YEAR ROUND DELIVERY				
J O	C I I C CIT I OLL		.5_			1. Z/ III I I O O I I D D L LI V L I I I				

Fall/Winter Delivery "cutoff" (date):

YEAR ROUND DELIVERY

LAKEVIEW (DEER LAKE) - CLARKSTON

Address	6150 WHITE LAKE RD.					Form Required: FORM	Yes	X	No	
City	CLARKSTON	State	MI	Zip	48346	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 625-4146					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 625-4393					If yes, what symbol?	— ,		1	
Email	cstrachan@indtwp.com					Benches Permitted: With permission	Yes	Х	No	
Contact	CAROL ANN STRACHAN	l Phone	(248) 625-	4146		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulati	ions - Installatior	Fee				
FLUSH, B	EVELS, SLANTS. NO HE	IGHT RES	TRICTIONS	S. NO LARGEI	R THAN 30" WIDI	ON SINGLE GRAVE.				
	TION FEE:									
.75 PSI, \$	75.00 MINIMUM									
VA MARK	ER - \$75.00									
FLUSH M	ARKER EITHER 12"x 12" (OR 8"x 16"	IS ALLOW	ED FOR CREM	MAINS WITH A M	ONUMENT				
Note:	ONLY 1 ADULT BURIAL A	ND 1 CREI	MATION MA	AY BE PLACEI	D IN A SINGLE G	RAVE, OR 2				
	CREMAINS IN A SINGLE	GRAVE, L	JNLESS OT	HERWISE DE	SIGNATED IN A	CEMETERY PLOT				
	EXISTING PRIOR TO TH	E ADOPTI	ON OF THI	S ARTICLE (1	1/01/2018) EXCE	PT FOR A MOTHER AND				
	INFANT OR 2 CHILDREN	I. UP TO 2	CREMATI	ON URNS ARE	E ALLOWED PER	CREMATION NICHE				
	AS LONG AS THE URNS	DO NOT E	EXCEED A	TOTAL OF 11	"x 11"x 15". THE	URN MUST BE				
	A MATERIAL SUITABLE	FOR INTE	RMENT. C	ARDBOARD IS	S NOT PERMITTE	D.				

Installation Fee Payable to: CASH, CHECK

LAKEVIEW CEMETERY

6483 WALDON CENTER DRIVE

CLARKSTON, MI 48346

Spring delivery begins (date):

MAY 15TH

Fall/Winter Delivery "cutoff" (date):

OCTOBER 1ST

LAKEVIEW - HOWELL

Address	920 ROOSEVELT ST.					Form Required:	Yes		No	Х
City	HOWELL	State	MI	Zip	48843	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 546-4500					Symbol Required on Memorial:	Yes		No	Χ
Fax	(517) 546-6014					If yes, what symbol?				
Email	dwylie@cityofhowell.org					Benches Permitted:	Yes	Х	No	
Contact	David Wylie		7 546 4500			Borders Required on Foundation:	Yes		No	Χ
		Cell	D. I	las ⁹ Dagulati	iono Inotollation	Fac				
				_	ions - Installation					
GRANITE	OR BRONZE. FLUSH, BE	EVELS, SL	ANTS AND	MONUMENTS	S SHALL NOT BE	SMALLER THAN				
16"x 8" IN	BASE SIZE NOR SHALL	THEY EXC	EED 40" IN	LENGTH FOR	R SINGLE BURIAL	SPACE, 90" IN				
LENGTH	FOR DOUBLE SPACE AN	D 18" IN W	/IDTH.							
FOUNDA [*]	TION FEE:									
.40 PSI, M	11NIMUM \$70.00									
TABLET (ON BASE OR FLUSH REQ	UIRED IN	NEW DIVIS	SION LOTS 140	0-898					
CALL TO	VERIFY ANY MARKER									
Notes: #	OF FULL BURIALS PER GRA	\\/E·1 #∩	E CDEMAIN!	S DED CDAVE	2 OP 1 FULL AND	1 CREMATION DEP CDAVE				
Notes. #	OF TOLL BUILDED LIK GIVE	4VL. 1 # O	TORLINAIN	OT LIK GRAVE.	2 ON 11 OLL AND	TOREMATION FER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF I	HOWELL - ATTN: David W	Vylie				VARIES - PLEASE CALL				
611 EAST	GRAND RIVER					Fall/Winter Delivery "cutoff" (date):				
HOWELL	. MI 48843					VARIES - PLEASE CALL				

LAKEVILLE

Address	825 E. DRAHNER ROAD ((NO MAIL I	DELIVERY)			Form Required:	Yes	Х	No	
City	OXFORD	State	MI	Zip	48370	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(248) 628-3317 (248) 628-2207					Symbol Required on Memorial:	Yes		No	Х
	,					If yes, what symbol?			1	
Email	pbennett@addisontwp.org	_				Benches Permitted:	Yes		No	Х
Contact	PAULINE BENNETT, CLERK	Phone	248-628-54 ext 216	409		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulati	ions - Installation	Fee				
FLUSH, E	BEVELS, SLANTS, AND MC	NUMENT	S. MONUM	IENTS MUST	BE LESS THAN 4	TALL.				
FOUNDA	TION FEE:									
12"x 12" -	\$120.00									
24"x 12" -	\$125.00									
36"x 12" -	\$130.00									
48"x 12" -	\$134.00									
COMPLE	TED CEMETERY FOUNDA	TION FOR	RM REQUIR	ED BEFORE	INSTALL					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAINS	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
L	en Fra Bereille (Outline tellinens Leiter (1.4.)				1
	on Fee Payable to:					Spring delivery begins (date):				
	I TOWNSHIP					WEATHER PERMITTING				
1440 RO	CHESTER ROAD					Fall/Winter Delivery "cutoff" (date):				
LEONARI	D, MI 48367					WEATHER PERMITTING				

<u>LAPHAM</u>

Address	BROOKVILLE AND GO	ODERDSON	RD.		Form Required: FORM	Yes	Х	No	
City	SALEM	State	MI Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(734) 453-6049 N/A				Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ
Email	michaelcolemjc@outlo	ook.com			Benches Permitted:	 Yes	Х	No	
Contact	MICHAEL COLE	Phone	(734) 223-7923		Borders Required on Foundation:	Yes		No	Х
			Rules & Regulation	ons - Installation	Fee				
INCH ME	MORIALS TO DO FOUI	NDATION/INS	STALLATION.						
MUST CA	II MICHAEL COLE AT	TIFAST 3 DA	YS BEFORE DELIVERY TO	O STAKE GRAVE	:				
WOOT OF	ALL WIGHTALL GOLL AT	LLAOT 3 DA	TO BET OILE BELIVERT TO	O OTAILE ORAVE					
Notes: #	OF FULL BURIALS PER	GRAVE: # C	F CREMAINS PER GRAVE:	OR FULL AND	CREMATION PER GRAVE				
	on Fee Payable to:				Spring delivery begins (date):				
	MORIALS				WEATHER PERMITTING				
580 SOU	TH MAIN				Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167				WEATHER PERMITTING				

LELAND CEMETERY

Address	6000 EARHART RD	OFF N. TER	RITORIA	_		Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone						Symbol Required on Memorial:	Yes		No	Χ
Fax						If yes, what symbol?			1	
Email						Benches Permitted:	Yes	Х	No	
Contact	BILL WAGNER	Phone	(734) 3	68-0765		Borders Required on Foundation:	Yes		No	Χ
				Rules & Regulation	ons - Installatior	Fee				
.60 PSI -	MINIMUM \$175.00									
Notes:										
Installation	on Fee Payable to:					Spring delivery begins (date):				
BILL WAG	GNER					WEATHER PERMITTING				
3647 EAS	ST NORTHFIELD CHUR	CH				Fall/Winter Delivery "cutoff" (date):				
ANN ARF	3OR. MI 48105					WEATHER PERMITTING				

LINCOLN MEMORIAL PARK

Address	21661 E. FOURTEEN MIL	LE ROAD				Form Required: FORM	Yes	Χ	No			
City	CLINTON TOWNSHIP	State	MI	Zip	48035	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(586) 791-3486					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(586) 791-4676					If yes, what symbol?						
Email	LMPCC1928@GMAIL.CC	<u>M</u>				Benches Permitted:	Yes		No	Х		
Contact	CLERK AT OFFICE	Phone	(586) 791	-3486		Borders Required on Foundation:	Yes		No	Χ		
						MUST HAVE PENCIL ROUNDED EDG	E					
			Ru	les & Regulati	ions - Installation	Fee						
FLUSH BF	RONZE/GRANITE. ALL HI	EADSTON	ES MINIMU	JM 4" THICK.	BRONZE MUST H	IAVE GRANITE BASE,						
NO VASE	S. ANY COLOR GRANITE	BRONZE	BASES AL	LOWED. PHO	OTO MARKERS M	IUST HAVE A						
SIGNED D	GNED DISCLAIMER FORM.											
CANNOT	DELIVER FOR 6 MONTHS	S AFTER T	HE BURIA	L.								
INSTALLA	ATION FEE MUST ACCOM	IPANY TH	E MARKE	R. NO PRE PA	YMENTS							
HALF LED	OGERS AND FULL LEDGI	ERS NOT	ACCEPTED	<u>). </u>								
16X8X4 IN	IFANT - \$500.00 24X12X	4 VA - \$60	0.00									
24"x 12" G	GRANITE - \$700.00 (1 NAN	ME ONLY),	\$950.00 (2	NAMES ON M	IARKER)							
36"x 12"x	4" COMPANION GRANITE	E (MAXIMU	M SIZE) =	\$1000.00								
24"x 12" B	RONZE MOUNTED ON 2	8"x 16" GR	ANITE BAS	SE - \$800.00								
28"x 16" -	\$800.00											
16"x 24" B	"x 24" BRONZE LAWNCRYPT WITH 20"x 28" GRANITE BASE - \$950.00											
31"x 10" C	R 36"x 12" COMPANION	- \$1000.00		ALL PRICES	SUBJECT TO CH	ANGE.						
NO 1/2 OF	R FULL LEDGERS											
Notes: Al	low 2 weeks after deliver	y of memo	orial for se	tting stone by	cemetery weath	er permitting						

Installation Fee Payable to: MUST BE COMPANY CHECK TO BE DELIVERED LINCOLN MEMORIAL PARK

(SAME ADDRESS AS ABOVE)

WITH MARKER!

NO DELIVERIES 1 WK BEFORE MOTHER'S DAY Fall/Winter Delivery "cutoff" (date): NOV. 15TH NO DELIVERIES 1 WK BEFORE MEMORIAL DAY

Spring delivery begins (date): APRIL 16TH

LIVONIA CENTER

Address	FARMINGTON RD.,	S. OF 5 MILE F	RD.			Form Required:	Yes		No	Х
City	LIVONIA	State	MI	Zip	48150	Grave Location Required on Memorial:	Yes		No	Х
Phone						Symbol Required on Memorial:	Yes		No	Χ
Fax						If yes, what symbol?			_	
Email						Benches Permitted:	Yes		No	
Contact	Phone				Borders Required on Foundation:	Yes	Х	No		
						2" border on all sides				
				Rules & Reg	gulations - Installat	ion Fee				
BRONZE	, FLUSH GRANITE, SLANTS, AND MONUMENTS - 30" MAX PER GRAVE					INCH MEMORIALS				
GOVERNMENT ISSUED MARKERS - ALL TYPES\$250.00						WILL INSTALL				
FLUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)						FOUNDATIONS				
	NDATIONS MUST BE O LENGTH AND WID									
	OF FULL BURIALS F	PER GRAVE: 1	# OF C	REMATION E	BURIALS PER GRAV	/E: 2-4				
Installatio	on Fee Payable to:	CAS	H, CHE	<u>CK</u>		Spring delivery begins (date):				
		CC.	VIA PHO	<u>ONE</u>		WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

LOVEDALE MEMORIAL

									1	
Address	5175 E. BRISTOL ROAD					Form Required:	Yes		No	X
City	BURTON	State	MI	Zip	48519	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 694-4101					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 694-9481					If yes, what symbol?			-	
Email	cfirman@covenantcemete	ery.com				Benches Permitted: Designated areas	Yes	Х	No	
Contact	CATHY FIRMAN AT CRESTWOOD	Phone	(810) 694	4-4101		Borders Required on Foundation:	Yes		No	Х
			Ru	ules & Regula	tions - Installatio	n Fee				
FLUSH G	RANITE (SAWN SIDES), E	BEVELS, S	LANTS							
MONUME	ENTS (IN DESIGNATED AF	REAS). PL	EASE CAL	LL.						
FOUNDA	TION FEE:									
\$16.50 PI	ER LINEAR INCH									
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # OF	F CREMAIN	IS PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installation	on Fee Payable to:	CASH, Ch	HECK			Spring delivery begins (date):				
LOVEDA	LE MEMORIAL CEMETER	Υ				YEAR ROUND (CALL FIRST)				
2020 EAS	ST HILL ROAD					Fall/Winter Delivery "cutoff" (date):				
GRAND E	BLANC, MI 48439					YEAR ROUND (CALL FIRST)				

MACHPELAH - FERNDALE

Address	21701 WOODWARD	AVENUE				Form Required: FORM	Yes	Χ	No	
City	FERNDALE	State	MI	Zip	48220	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 542-1146					Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?			,	
Email	martina@machpelaho	cemetery.org				Benches Permitted: See note below	Yes	Х	No	
Contact	MARTINA	Phone	(248) 54	12-1146		Borders Required on Foundation:	Yes		No	Χ
				Pulos 9 Dogul	ations Installatio	n Eoo				
				_	ations - Installatio					
,	·					RIFY. PHOTO MEMORIALS				
		REMATION GAI	<u>RDENS</u> ML	JST NOT EXCE	ED 16"x 9"x 4"AND	MUST BE SAWN SIDES.				
	TION FEE:									
1.50 PSI I	PLUS PERMIT FEE OF	= \$50.00 (SING	SLE), \$100	0.00 (DOUBLE) - MONUMENT PE	ERMIT FEE \$250.00				
ALL INTE	RNMENTS MUST BE	PAID IN FULL	PRIOR T	O APPROVAL						
FOLLOW	ING FOUNDATION FE	ES INCLUDE	S PERMI	ΓFEE:						
16"x 8" - 9	\$242.00					Drawing of memorial must be submi	tted_			
18"x 10" -	\$320.00					with permit and payment				
24"x 10" -	\$450.00					*BENCHES: MUST CONTACT				
24"x 12" -	\$450.00					CEMETERY FOR RESTRICTIONS				
26"x 12" -	\$518.00									
28"x 12" -	\$554.00									
30"x 12" -	\$590.00									
Notes: #	OF FULL BURIALS PER	GRAVE: 1 # 0	OF CREMA	ATION BURIALS	PER GRAVE: 1					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
MACHPE	LAH CEMETERY ASS	OCIATION				WEATHER PERMITTING				
21701 W	OODWARD AVENUE					Fall/Winter Delivery "cutoff" (date):				
FERNDAI	LE, MI 48220					WEATHER PERMITTING				

MACHPELAH - FLINT

							_		
Address	4615 BRANCH					Form Required:	Yes	No	Х
City	FLINT	State	MI	Zip	48506	Grave Location Required on Memorial:	Yes	No	Χ
Phone Fax	(810) 733-5271 N/A					Symbol Required on Memorial:	Yes	No	Χ
Email	annsalti@gmail.com					If yes, what symbol?		—]	
	-					Benches Permitted:	Yes _	No	
Contact	CAROL HURAND and JUDY KASLE	Phone	(810) 694 (810)733-			Borders Required on Foundation:	Yes	No	
			Ru	iles & Regulat	ions - Installation	ı Fee			
FOR LAR	GER MARKERS OR MON	UMENTS,	CALL JUD	Y FOR REGUL	ATIONS.				
24"x 12" -	\$250.00								
36"x 12" -	\$500.00								
Notos: #	OF FULL BURIALS PER GRA	۸\/ ⊏ : 1 # ر		LIUNI BI IDIVI & I	DED CDAV/E: 1				
110tes. #	OF TOLL BORNALS TER GRA	<u> </u>	OF CITEINIA	TION BUILDE	I LIC GICAVE. 1				
Installatio	on Fee Payable to: <u>C</u>	heck Only				Spring delivery begins (date):			
MACHPE	LAH CEMETERY					WEATHER PERMITTING			
P.O. Box	320040					Fall/Winter Delivery "cutoff" (date):			
Flint MI 4	8532					WEATHER PERMITTING			

MACON

									1	
Address	415 SOUTH OBSERVATO	ORY				Form Required:	Yes		No	X
City	CLINTON	State	MI	Zip	49236	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 274-7422					Symbol Required on Memorial:	Yes		No	Χ
Fax						If yes, what symbol?			, ,	
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Χ	No	
Contact	BRAD BOUCHIE	Phone	(734) 274-	7422		Borders Required on Foundation:	Yes	Χ	No	
						2" border on all sides				
			Ru	les & Regulati	ons - Installation	Fee				
BRONZE,	FLUSH GRANITE, SLANT	S, BEVEL	S, AND MO	NUMENTS						
FOUNDA	TION FEE:									
.65 PSI, N	11NIMUM \$200.00									
	51, WIII WILLIAM \$250.00									
ALL BASE	ES FOR MONUMENTS MU	IST BE NO	LONGER T	THAN 34" ON	A SINGLE GRAVE	<u> </u>				
**	RKERS ARE SUBJECT TO	THE ADD		DENIAL OF T	THE CEMETERY I	BOARD				
ALL IVIA	INICIO ANE SOBJECT TO		NOVAL OF	A DEINIAL OI	THE OLIVIETERY I	JOAND.				
Notes: #4		VE 4 " O	- ODENA ING	DED ODAVE	0.00 4 5111 4 4 4 5	ODEMATION DED ODANG				
Notes: # (OF FULL BURIALS PER GRA	ve: 1 # O	- CREMAINS	PER GRAVE:	Z OR 1 FULL AND 1	CREWATION PER GRAVE				
In atalleti	on Eas Dayable to: CACII	CHECKS	DNI V			Spring delivery begins (detc):				
	on Fee Payable to: <u>CASH</u>	CHECKS (JINL T			Spring delivery begins (date):				
BRAD BC						WEATHER PERMITTING				
	51 KEHOE ROAD Fall/Winter Delivery "cutoff" (date):									
CLINTON	LINTON, MI 49236 OCTOBER 1ST									

MAPLE GROVE

Address	28830 ANN ARBOR TRA	IL				Form Required:	Yes		No	Х
City	WESTLAND	State	MI	Zip	48185	Grave Location Required on Memorial:	Yes	Х	No	
Phone						Symbol Required on Memorial:	Yes		No	Χ
Fax						If yes, what symbol?			_	
Email	ALAN.ABBAS@GMAIL.C	<u>OM</u>				Benches Permitted:	Yes	Х	No	
Contact	ALAN ABBAS	Phone	(313) 674	7171		Borders Required on Foundation:	Yes		No	Х
	JOHN (GROUNDS)	Phone	(734) 634	-5698						
			Ru	les & Regulat	ions - Installatio	n Fee				
FLUSH, E	EVELS, SLANTS AND MC	NUMENT	S IN DESIG	NATED AREA	S. SECTION 5 IS	S FLUSH ONLY.				
NO POR	CELAIN OR CERAMIC PHO	OTOS/TILE	S ON FLU	SH MARKERS	ONLY. ETCHED	OR ENGRAVED IS				
ACCEPTA	ABLE.									
FLUSH M	ARKER INSTALLATION F	EE: \$1.10 ¡	oer square i	nch		IMG - PART OF MAPLE GROVE				
24"x 12" -	\$316.80					ISLAMIC SECTION				
44"x 14" -	\$677.60									
FULL LED	OGER 30"x 72" - \$1200.00									
UPRIGHT	MONUMENT INSTALLAT	ION FEE:								
\$1.10 PSI	- MINIMUM FOUNDATION	N PREP FE	E \$250.00							
Notes: #	OF FULL BURIALS PER GRA	AVE: # OI	CREMAINS	S PER GRAVE:	OR FULL AND	CREMATION PER GRAVE				
										1
	on Fee Payable to:					Spring delivery begins (date):				
MAPLE G	ROVE CEMETERY					WEATHER PERMITTING				
P.O. BOX	653					Fall/Winter Delivery "cutoff" (date):				
DEARBO	RN HGTS, MI 48127					WEATHER PERMITTING				

MARBLE PARK

MILAN, MI 48160

Address	520 W. MAIN ST.					Form Required:	Yes	No	Х
City	MILAN	State	MI	Zip	48160	Grave Location Required on Memorial:	Yes	No	Х
Phone	734-439-5660					Symbol Required on Memorial:	Yes	No	Х
Fax	734-439-5660					If yes, what symbol?		-	
Email	info@marbleparkcemeter	<u>y.com</u>				Benches Permitted:	Yes	No	
Contact	JON VESPER	Phone	734-645-4	795		Borders Required on Foundation:	Yes	No	Х
			Rul	les & Regulati	ions - Installation	Fee			
 FLUSH. E	BEVELS, SLANTS AND MC	NUMENTS		_					
	MINIMUM AND ALL VA								
I -	4x12x4= \$187.20								
	·								
Delivery	early morning till noon								
		AVE 1: # OF	- CREMAINS	S PER GRAVE 4	4: OR 1 FULL AND	3 CREMATION PER GRAVE			
Installatio	on Fee Payable to: <u>CASH</u> ,	CHECK				Spring delivery begins (date):			
	PARK CEMETERY - ATTN		SPER			WEATHER PERMITTING			
520 W. M	AIN STREET					Fall/Winter Delivery "cutoff" (date):			

WEATHER PERMITTING

MEADOWCREST MEMORIAL - HAMTRAMCK

Address	5800 EAST DAVISON ST	•				Form Required:	Yes	No	Х
City	HAMTRAMCK	State	MI	Zip	48212	Grave Location Required on Memorial:	Yes	No	Х
Phone	(313) 891-2429					Symbol Required on Memorial:	Yes	No	Χ
Fax	(313) 891-5050					If yes, what symbol?		_	
Email	N/A					Benches Permitted:	Yes	No	Х
Contact	KEITH ADKINSON	Phone	(313) 891	-2429		Borders Required on Foundation:	Yes	No	Χ
			Ru	les & Regula	tions - Installatior	Fee			
GRANITE	AND BRONZE FLUSH MA	ARKERS C	NLY.						
FOUNDA [*]	TION FEE:								
24"x 12"x	4" - GRANITE OR BRONZ	E - \$250.0	0						
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE	: 2 OR 1 FULL AND	1 CREMATION PER GRAVE			
	on Fee Payable to:					Spring delivery begins (date):			
	CREST MEMORIAL					WEATHER PERMITTING			
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):			
						WEATHER PERMITTING			

MEADOWVIEW MEMORIAL GARDENS

Address	3136 N. STATE RD.					Form Required:	Yes		No	Х
City	DAVISON	State	MI	Zip	48423	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(810) 653-2196 (810) 658-0165					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ
Email	cfirman@covenantcen	netery.com				Benches Permitted:	 Yes	Х	No	
Contact	CATHY	Phone	(810) 69	4-4101		Borders Required on Foundation:	Yes		No	Х
E1 11011 0	DANITE (OAMAN OIDEG	ONI VO AND		_	ulations - Installa	tion Fee				
FLUSH G	RANITE (SAWN SIDES	S ONLY) AND	BRONZE	MARKERS.	NO BEVELS.					
FOUNDA	TION FEE:									
	4" - (LARGEST # X .16	5.50 PER LINE	AR INCH)							
EXAMPL	E - 24" x .16.50 = \$396.0	00								
Notes: #	OF FULL BURIALS PER	GRAVE: 1 # O	F CREMAIN	NS PER GRA	VE: 2 (2ND RIGHT	OF INTERMENT FEE)				
	OR 1 FULL AND 1	1 CREMATIO	N PER GR	AVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	VVIEW MEMORIAL GAI	RDFNS				APRIL 15TH OR CALL BEFORE DELIV	/FRIN	G		
2020 E. H						Fall/Winter Delivery "cutoff" (date):		•		
	BLANC, MI 48439					WEATHER PERMITTING				

<u>METAMORA</u>

Address	DRYDEN ROAD					Form Required:	Yes		No	Х
City	METAMORA	State	MI	Zip	48455	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 735-5050					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 735-9514					If yes, what symbol?				
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 695- (810) 735-			Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulat	ions - Installation	Fee				
FLUSH, S	LANTS, BEVELS & MONU	IMENTS								
FOUNDA	TION FEE:									
.50 PSI, \$	150.00 MINIMUM									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN:	S PER GRAVE:	2 OR 1 FULL AND	CREMATION PER GRAVE				
										1
Installatio	on Fee Payable to:					Spring delivery begins (date):				
GENESEI	E VALLEY VAULT					WEATHER PERMITTING				
10510 N.	HOLLY RD.					Fall/Winter Delivery "cutoff" (date):				
HOLLY, M	11 48442					WEATHER PERMITTING				

MICHIGAN MEMORIAL PARK

FLAT ROCK, MI 48134

Address	32163 HURON RIVER D	RIVE				Form Required: FORM	Yes	Х	No	
City	FLAT ROCK	State	MI	Zip	48134	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 782-2473					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 782-7241					If yes, what symbol?			_	
Email	abokor@michmempark.c	<u>om</u>				Benches Permitted:	Yes	Х	No	
Contact	Amanda Bokor	Phone	(734) 78	3-1276	Nicholas	Borders Required on Foundation:	Yes	Х	No	
						2" border required				
			R	ules & Reg	gulations - Installatio	on Fee				
FLUSH B	RONZE ONLY. MONUME	ENTS IN R	ESTRICTE	D AREAS.	ROUND VASES ON	ILY ON BRONZE MARKERS.				
BABY LAI	ND IS 6"x 6", 20"x 10" or 1	3"x 13" BR	ONZE - M	UST HAVE	GRANITE BASE.					
ALL BRO	NZE MUST HAVE GRANI ^T	TE BASE A	NY COLO	R. NO INS	SCRIPTIONS on GR	ANITE BASES.				
FLAT REI	LIEF BRONZE PORTRAIT	S PREFFE	RED. CEF	RAMIC PHO	OTOS WITH A CAST	BRONZE RING (Coldspring Precious Port	trait) Al	RE AC	CEPTI	ED.
2 NAMES	CANNOT GO ON A 24"x	12" OR A 2	24"x 14". N	IAXIMUM S	SIZE OF 2ND MARKE	R ON SINGLE GRAVE CANNOT EXCEE	D SIZE	OF FI	RST N	IARKEI
MINIMUM	I SIZE OF COMPANION N	MARKER C	N TWO G	RAVES IS	44"x 14" . BLOCK 38	3				
BI-LEVEL	REQUIRES 16"x 24" OR	24"x 30",	MINIMUM	SIZE FOR	A TRIPLE GRAVE I	S 56"x 16".				
6"x 6" - \$7	70.00	24"x 30"	- \$667.00		PRICE	<u>MILITARY</u>				
20"x 10" -	\$235.00	44"x 14"	- \$605.00		FOUNDATION	28"x 26" W/VASE - \$510.00				
24"x 12" -	\$314.00	56"x 16"	- \$840.00		BY SIZE OF GRANITE	54"x 16"x 4" W/VASE - \$706.00				
24"x 14" -	\$353.00	72"x 32"	- \$1,915.00	0	BASE:	54"x 16"x 4" NO VASE - \$605.00				
16"x 24" -	\$392.00				.70 PSI	12"x 12" BRONZE VASE - \$101.	00			
Notes: #	OF FULL BURIALS PER	GRAVE: UI	P TO 2 DE	PENDING	ON SECTION					
# (OF CREMAINS PER GRA	VE: 3 OR 1	FULL AN	D 2 CREM	AINS PER GRAVE					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
MICHIGA	N MEMORIAL PARK					WEATHER PERMITTING				
P.O. BOX	610					Fall/Winter Delivery "cutoff" (date):				

WEATHER PERMITTING

MILFORD MEMORIAL

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

										_	
Address	WIXOM ROAD					Form Required:		Yes		No	Х
City	MILFORD	State	MI	Zip	48393	Grave Location Requir	ed on Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on M	1emorial:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?				=	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG	Phone	(248) 887	'-6700		Borders Required on F	oundation:	Yes	Х	No	
HCM	HURON CEMETERY MA	INTENANC	E			2" bord	der on all sides				
			Rı	ıles & Regulat	ions - Installatior	Fee					
BRONZE,	FLUSH GRANITE ONLY										
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	<u>50.00</u>							
FLUSH SI	ETTING OF GRANITE & B	RONZE OI	N GRANITI	E (NO FOUND	ATION)						
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BRO	ONZE ON	CONCRETE (N	ION VA)						
\$0.70 PSI	OF FOUNDATION, MINIM	ИUM \$250.0	00								
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	ES THAN MON	UMENT BASE.						
ADD 4" TO	O LENGTH AND WIDTH C	F BASE T	O DETERN	INE FOUNDA	TION SIZE NEED	ED.					
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	LY	\$100.00	(ADD \$50	.00 FOR ALL F	EES FOR BUILT	N VASE)					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREI	MATION BURIA	ALS PER GRAVE:	2-3					
(C	ALL MIKE @ HURON CEN	METERY M	<u>AINT</u> ENAN	NCE FIRST)							
		_	_	·							
Installatio	on Fee Payable to:	CASH, Ch	<u>IECK</u>			Spring delivery begin	ns (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

MT. AVON

										_	
Address	800 1ST STR	EET					Form Required: FORM	Yes	X	No	
City	ROCHESTER	?	State	MI	Zip	48307	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 651-906	61					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 733-317	70					If yes, what symbol?			_	
Email	LOCONNOR	@ROCHES	TERMI.OR	<u>G</u>			Benches Permitted:	Yes		No	Χ
Contact	AT CITY OF		Phone R	(248) 65 (248) 65			Borders Required on Foundation:	Yes		No	Χ
				R	ules & Regula	ations - Installation	n Fee				
Fifth Add	ition (Flush m	arkers only	<u>'</u>				There are no height regulations in Additions	One, Two	D		
Sizes	Maximum	Standard					Three or Four.				
Single	28x12	24x12									
Double	68x24	48x12									
Veterans		24x12									
Cremation	18x13	18x9									
Infant	18x10	18x10									
Sixth Add	dition (Monum	ents Only)									
Single	32x24x48 H	24x12x8 H	l								
Double	68x24x48 H	24x12x18	Н								
FOUNDA	TION FEE: \$1.	.00 PSI L x V	٧								
http://wwv	v.ci.rochester.n	ni.us/117/Mc	ount-Avon-C	<u>Cemetery</u>							
No Flowe	er vases unles	s part of the	e memoria	I							
Notes: #	OF FULL BURIA	LS PER GRA	VE: 1 # OF	CREMAIN	NS PER GRAVE	: 2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payabl	e to:					Spring delivery begins (date):				
CITY OF	ROCHESTER						APRIL 15TH				
400 SIXT	H ST. STREET	-					Fall/Winter Delivery "cutoff" (date):				
ROCHES	TER, MI 48307	7					OCTOBER 31ST				

MT. CARMEL

18303 ALLEN RD.

BROWNSTOWN, MI 48193

									_	
Address	909 FORD AVE.					Form Required: FORM	Yes	X	No	
City	WYANDOTTE	State	MI	Zip	48192	Grave Location Required on Memorial:	Yes	<u> </u>	No	Х
Phone	(734) 285-2155					Symbol Required on Memorial:	Yes	<u> </u>	No	Χ
Fax	(734) 285-6510					If yes, what symbol?			-	
Email	mariles.lori@aodcemeteri	es.org				Benches Permitted:	Yes	<u> </u>	No	Х
Contact	LORI MARILES	Phone	(734) 285	-2155		Borders Required on Foundation:	Yes		No	Χ
			Ru	iles & Regulati	ions - Installation	Fee				
MONUME	NTS WITH BASE, BEVEL	, SLANT O	R LAWN-L	EVEL MARKES	S ARE PERMITTE	D ON ONE GRAVE				
OR PLAC	ED OVER MULTIPLE GRA	AVES. THE	E MAXIMU	M LENGTH OF	A MEMORIAL IS	AS FOLLOWS:				
30"x 14"x	4" - ONE SPACE									
54"x 14"x	6" - TWO SPACES									
16"x 10"x	4" - INFANT SPACE - \$300	0.00								
MILITARY	/ MARKER - \$325.00									
24"x 12"x	4" - \$475.00									
48"x 12"x	4" - \$630.00									
MONUME	NTS - WITH PRIOR APPR	ROVAL AN	D ADDITIO	NAL LOT UPO	GRADE FEE:					
BASE 24"	x 12" - \$500.00									
BASE 48"	x 14" - \$1,000.00									
BASE 60"	x 14" - \$1,250.00									
BASE 66"	x 14" - \$1,375.00									
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CRE	MAINS PER G	RAVE: 2					
Installatio	on Fee Payable to: MT. CA	ARMEL CEI	METERY			Spring delivery begins (date):				
MAIL TO:	OUR LADY OF HOPE CE	METERY				APRIL 1ST				

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST

MT. ELLIOTT

Address	1701 MT. ELLIOTT ROAD)				Form Required: FORM	Yes	Χ	No	
City	DETROIT	State	MI	Zip	48207	Grave Location Required on Memorial:	Yes		No	Х
Phone	(313) 365-5650					Symbol Required on Memorial:	Yes		No	Х
Fax	(313) 365-6460					If yes, what symbol?			1	
Email	jabbott@mtelliott.com					Benches Permitted:	Yes		No	Х
Contact	Joann Abbott	Phone				Borders Required on Foundation:	Yes		No	Χ
			Rı	ules & Regulat	tions - Installatio	n Fee				
FOUNDA [*]	ΓΙΟΝ FEE:									
16"x 8" BA	ABY MARKERS - \$350.00									
24"x 12" S	SINGLE GRANITE MARKE	RS (INCLU	JDING GO	VERNMENT) -	\$350.00					
ALL MON	UMENTS, BENCHES, AND	CREMAT	TON MEM	ORIALS - \$600	0.00					
FLUSH G	RANITE MARKERS, SLAN	ITS AND M	ONUMEN	ITS IN DESIGN	IATED AREAS. M	ONUMENTS NO MORE				
THAN 7" I	N HEIGHT, INCLUDING T	HE BASE.	BASES M	MINIMUM 10" W	/IDE & 8" IN HEIG	SHT. MONUMENT				
МІМІМИМ	THICKNESS OF 8", MININ	MUM HEIG	HT OF 28	", MINIMUM LE	ENGTH OF 36"					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAT	ION BURIALS P	ER GRAVE: 2					
	OR 1 FULL AND 1 CREMATION	ON BURIAL	PER GRAV	VΕ						

Installation Fee Payable to:

MT. ELLIOTT CEMETERY (MAIL TO MT. OLIVET - DET)

17100 VAN DYKE

DETROIT, MI 48234

Spring delivery begins (date): APRIL 1ST

Fall/Winter Delivery "cutoff" (date): NOV. 30TH

FROM DEC 1 THRU MAR 31, MUST CONTACT

CEMETERY FOR DELIVERY APPROVAL

MT. HOPE - LAPEER

										_	
Address	1230 W. PARK ST.					Form Required:		Yes		No	Х
City	LAPEER	State	MI	Zip	48446	Grave Location Required of	on Memorial:	Yes		No	Х
Phone	(810) 664-2902					Symbol Required on Memo	orial:	Yes		No	Х
Fax	(810) 667-7157					If yes, what symbol?				_	
Email	djansen@ci.lapeer.mi.us					Benches Permitted:	Call first	Yes	Х	No	
Contact	DANA JANSEN	Phone	(810) 6	64-2902		Borders Required on Foun	dation:	Yes	Χ	No	
y	www.ci.lapeer.mi.us					2" border o	n all sides				
				Rules & Reç	gulations - Installatio	on Fee					
FLUSH, B	SEVELS, SLANTS										
Max 40"											
FOUNDA	TION FEE:					Cash and Checks Accept	ted				
.40 PSI											
	FICE AT 810-664-2902 FO					D 1 CREMATION PER GRAVE					
Installatio	on Fee Payable to:	Cash & Che	<u>ecks</u>			Spring delivery begins (d	late):				
CITY OF	LAPEER					APRIL 1ST					
576 LIBE	RTY STREET					Fall/Winter Delivery "cuto	off" (date):				
LAPEER.	MI 48446					NOVEMBER 1ST					

MT. HOPE - PORT HURON

Address	1209 KRAFFT RD.					Form Required:	Yes	No	Х
City	PORT HURON	State	MI	Zip	48060	Grave Location Required on Memorial:	Yes	No	Х
Phone	(810) 985-5323					Symbol Required on Memorial:	Yes	No	Х
Fax	(810) 985-3611					If yes, what symbol?			
Email	KEITH@HOLYTRINITYP	H.ORG				Benches Permitted:	Yes	No	Х
Contact	KEITH CAMPBELL	Phone	(810) 985-	5323		Borders Required on Foundation:	Yes	No	Χ
				es & Regulat	ions - Installation	Fee			
FLUSH, E	BEVELS, SLANTS (no long	er acceptin	g benches)						
	TION FEE:								
.60 PSI, \$	144.00 MINIMUM								
CALL FO	R LARGER MARKERS								
Notos: #	OF FULL BURIALS PER GR.	۸\/E:1 # ∩۱	E ODEMAINS	DED CDAVE	4 OP 1 EUL AND 1	CREMATION REP CRAVE			
Notes. #	OF FULL BURIALS FER GR.	AVE. I # OI	CREWAINS	PER GRAVE.	4 OR 1 FULL AND 1	CREWATION FER GRAVE			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
МТ. НОР	E CEMETERY					WEATHER PERMITTING			
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):			
						 WEATHER PERMITTING			

MT. HOPE CATHOLIC - PONTIAC

Address	120 LEWIS STREET					Form Required: FORM	Yes	X	No	
City	PONTIAC	State	MI	Zip	48342	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 350-1900					Symbol Required on Memorial:	Yes	Χ	No	
Fax	(248) 350-1737					If yes, what symbol? Cross				
Email	oconnor.colleen@aod.org	L				Benches Permitted: *See Below	Yes	Χ	No	
Contact	COLLEEN O'CONNOR	Phone	(248) 350	-1900		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulat	ions - Installatior	Fee				
FLUSH, E	BEVELS, SLANTS AND MC	NUMENT	S.							
MARKER	S IN BABY SECTION MUS	ST NOT EX	CEED 20"x	(10"x 4"						
24" WIDE	MAX FOR SINGLE GRAV	Έ.								
*BENCHE	S ARE PERMITTED BUT	REQUIRE	PRIOR AP	PROVAL						
FOUNDA	TION FEE:									
.60 PSI -	\$225.00 MINIMUM.									
Notes: #	OF FULL BURIALS PER GRA	AVE: # O	F CREMAIN:	S PER GRAVE:	OR FULL AND	CREMATION PER GRAVE				
Installation	on Fee Payable to:					Spring delivery begins (date):				
HOLY SE	PULCHRE CEMETERY					WEATHER PERMITTING				
25800 W.	TEN MILE RD.					Fall/Winter Delivery "cutoff" (date):				
SOUTHF	ELD, MI 48033					WEATHER PERMITTING				

MT. HOPE MEMORIAL GARDENS - LIVONIA

Address	17840 MIDDLEBELT					Form Required: FORM		Yes	Χ	No	
City	LIVONIA	State	MI	Zip	48152	Grave Location Required or	n Memorial:	Yes		No	Х
Phone	(734) 522-2200					Symbol Required on Memo	rial:	Yes		No	Χ
Fax	(734) 522-5463					If yes, what symbol?					
Email	jjohnson@mthopememori	almi.com				Benches Permitted: C	Call first	Yes	Χ	No	
Contact MMG	C. COOPER or J. JOHNSON	Phone	(734) 522-	2200		Borders Required on Found	dation:	Yes		No	Χ
			Rul	les & Regulat	ions - Installatior	Fee					
FLUSH M	ARKERS ONLY. GRANIT	E & BRON	ZE ALLOW	ED. MONUMI	ENT SECTION. B	RONZE MUST BE					
MOUNTE	D ON BASE BEFORE DEL	IVERY TO	CEMETER	Y. VASES AL	LOWED. ANY C	OLOR GRANITE					
BRONZE	S BASES ALLOWED. ALL	MONUME	NTS MUST	BE APPROV	ED BY MT. HOPE	BEFORE SOLD.					
	FEES:										
	Flagging Fee:	\$175.00 F	Payable to M	It. Hope Mem	orial Gardens						
	Setting Fee:	\$1.00 PS	I payable to	Inch Memoria	ıls						
	Foundation Fee:	\$1.00 PS	I Payable to	Mt. Hope Mer	morial Gardens						
MONUME	NTS AND BENCHES \$1.0	0									
GRANITE	BASE REQUIRED ON BE	NCH									
36" MAX	ON SINGLE			MUST GET F	FORM APPROVE	BEFORE YOU CAN SEND	MONEY FO	R FLA	GGIN	G	
42" BENC	:H	COMPANIC	NIS								
48" MAX	ON DOUBLE	COMITANIC	7143								
MAX 60" I	BENCH ALLOWED										
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMAIN	S PER GRAVE:	: 3 OR 1 FULL AND	2 CREMAINS PER GRAVE					
											ı
Installatio	on Fee Payable to: CHEC	K MUST E	BE FROM IN	ICH MEMORI	ALS	Spring delivery begins (da	ate):				
МТ. НОР	E MEMORIAL GARDENS					MARCH 15th					
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cuto	off" (date):				

NOVEMBER 1st

MT. KELLY CEMETERY

Address	23250 CHERRY HILL RO	AD				Form Required: FORM	Yes	Х	No	
City	DEARBORN	State	MI	Zip	48124	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(313) 278-5555					Symbol Required on Memorial:	Yes		No	Χ
Fax	(313) 278-8582					If yes, what symbol?		1		
Email	cemetery@shparish.org					Benches Permitted:	Yes		No	Χ
Contact	ELENA LOVELACE lane10020@gmail.com	Phone	C(313) 26 H(313) 56			Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulati	ions - Installation	Fee				
INCH ME	MORIALS TO DO FOUNDA	ATIONS								
A DRAWI	NG WITH SIZE OF MEMO	RIAL AND	WORDING	NEEDS TO B	E FAXED TO THE	OFFICE BEFORE				
PRODUC	TION.									
CEMETE	RY REQUIRES 1 DAY NOT	TICE PRIO	R TO DELI	VERY OF MEN	MORIALS.					
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 2	OR 1 FULL AND	2 CREMAINS PER GRAVE				
										1
	on Fee Payable to:					Spring delivery begins (date):				
INCH ME						WEATHER PERMITTING				
580 SOU	ΓΗ MAIN					Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167					WEATHER PERMITTING				

MT. OLIVET - DETROIT

Installation Fee Payable to:

(SAME ADDRESS AS ABOVE)

MT. OLIVET CEMETERY

Address	17100 VAN DYKE					Form Required: FORM	Yes	Χ	No	
City	DETROIT	State	MI	Zip	48234	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(313) 365-5650					Symbol Required on Memorial:	Yes		No	Χ
Fax	(313) 365-6460					If yes, what symbol?				
Email	jabbott@mtelliott.com					Benches Permitted:	Yes		No	Χ
Contact	Joann Abbott	Phone	(313) 365-	5650		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulati	ons - Installation	Fee				
FLUSH G	RANITE & MONUMENTS.	DUPLICA	TES ALLO	WED. CREMA	ATION BENCHES	(MUST HAVE				
PEDESTA	AL) AND SLANTS IN DESIG	SNATED A	REAS ONL	Y. VA'S TO B	E BURIED UNDE	R NEW MARKERS.				
1 MARKE	R PER GRAVE ALLOWED									
FOUNDA [*]	TION FEE:									
16"x 8" (B	ABY) - \$350.00									
24"x 12" (SINGLE, INCL GOV.), PEN	ICIL ROUN	ID EDGES,	SAWED SIDE	S, FLAT TOP - \$	350.00				
24"x 16" (l	DOUBLE INTERMENT, SE	C. C) - \$35	50.00							
CORNER	POSTS - \$50.00 EACH									
LEDGERS	S (DUP. ONLY) - \$500.00									
ALL MON	UMENTS, BENCHES, AND	CREMAT	TON MEMO	RIALS - \$600.	.00					
NO RESE	T FEESNEED LETTER 1	TO STATE	WHAT TO	DO WITH OLI	O MARKER.					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMATIO	ON BURIALS PE	ER GRAVE: 2					
(OR 1 FULL AND 1 CREMATION	ON BURIAL	PER GRAVE							

Spring delivery begins (date): APRIL 1ST

FROM DEC 1 THRU MAR 31, MUST CONTACT

CEMETERY FOR DELIVERY APPROVAL

Fall/Winter Delivery "cutoff" (date): NOV. 30TH

MT. OLIVET - HOWELL

									1	
Address	ROOSEVELT ST.					Form Required:	Yes		No	Х
City	HOWELL	State	MI	Zip	48843	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 546-4500					Symbol Required on Memorial:	Yes		No	Χ
Fax	(517) 546-6014					If yes, what symbol?				
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	ANN MARIE SMALLER ST. JOSEPH - HOWELL	Phone	(517) 546-	-0090		Borders Required on Foundation:	Yes		No	Х
			Rul	les & Regulat	ions - Installation	Fee				
FLUSH, E	BEVELS, SLANTS AND MC	NUMENT	S							
FOUNDA	TION FEE:									
.40 PSI, \$	70.00 MINIMUM									
CALL TO	VERIFY ANY MARKER									
Tho City @	CityofHowell.org									
THECHY	<u>Oityon lowell.org</u>									
Notes: #	OF FULL BURIALS PER GRA	AVE: # OI	F CREMAINS	S PER GRAVE:	OR FULL AND	CREMAINS PER GRAVE				
				-						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	HOWELL					WEATHER PERMITTING				
611 EAST	GRAND RIVER					Fall/Winter Delivery "cutoff" (date):				
HOWELL	, MI 48843					WEATHER PERMITTING				

MT. PLEASANT

									7		
Address	BALDWIN RD. OFF C	AKWOOD RI) .			Form Required:	Yes		No	Х	
City	OXFORD	State	MI	Zip	48371	Grave Location Required on Memorial:	Yes		No	Х	
Phone	(248) 628-9787					Symbol Required on Memorial:	Yes		No	Χ	
Fax	(248) 628-8139					If yes, what symbol?			_		
Email	krichter@oxfordtowns	hip.org				Benches Permitted:	Yes		No	Χ	
Contact	KELLY RICHTER @ TOWN	N HAL Phone	(248) 6	28-9787		Borders Required on Foundation:	Yes		No	Χ	
FOUNDA	TION FEE: .60 PSI										
TOWNSF	IIP RUNS THE CEMET	ERY. GENES	SEE VALI	LEY VAULT F	PUTS IN FOUNDA	TIONS.					
I											
Notes: #	OF FULL BURIALS PER	GRAVE: 1 # (OF CREM	AINS PER GRA	AVF: 2 OR 1 FULL A	ND 1 CREMATION PER GRAVE					
		0.0	J. G. (2.11.2								
Installation	on Fee Payable to: CA	ASH, CHECK,C	C in office	<u> </u>		Spring delivery begins (date):					
OXFORD	TOWNSHIP					WEATHER PERMITTING					
300 DUN	LAP RD.					Fall/Winter Delivery "cutoff" (date):					
OXFORD	, MI 48371					WEATHER PERMITTING					

MT. VERNON

Address	CORNER OF 28 MILE & I	MT. VERN	ION RD.			Form Required:	Yes		No	Х			
City	WASHINGTON	State	MI	Zip	48094	Grave Location Required on Memorial:	Yes		No	Х			
Phone Fax	(586) 677-4200 (586) 677-4238	Cemeter	y Informa	tion: 586-786-0	022	Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х			
Email	BABINSKIS@WASHING	TONTWP	MI.ORG			Benches Permitted:	— Yes		No	Х			
Contact	STAN BABINSKI (Clerk)	Phone	(586) 67	7-4200		Borders Required on Foundation:	Yes	X	No				
	SHELLEY RIOS	RIOSS@	WASHING	STONTWPMI.O	<u>RG</u>	3" border required around stone/m	arker		_	,			
			R	ules & Regulat	ions - Installatio	on Fee							
FOUNDA [*]	TIONS TO BE ORDERED	THRU CH	ARTER TO	OWNSHIP OF V	VASHINGTON.								
FOUNDA [*]	TIONS ARE POURED MAY	Y - OCTO	BER, DEPI	ENDING ON WE	EATHER.								
PRICING	DEPENDS ON SIZE OF M	ONUMEN	IT. CONT	ACT TOWNSHI	P FOR DETAILS	WHEN ORDERING.							
FOUNDA	TION FEE:												
42" x 24"	- \$550.00												
54" x 24"	- \$700.00												
Notes: #	OF FULL BURIALS PER G	GRAVE: 1	# OF CR	EMAINS PER G	SRAVE: 2								
Installatio	on Fee Payable to:					Spring delivery begins (date):							
CHARTE	R TOWNSHIP OF WASHIN	NGTON				MAY 1ST							
57900 VA	N DYKE					Fall/Winter Delivery "cutoff" (date):							
WASHING	STON, MI 48094					NOVEMBER 1ST							

NEW CALVARY CATHOLIC

NEW CALVARY CATHOLIC CEMETERY

(SAME ADDRESS AS ABOVE)

									_	
Address	4142 FLUSHING RD.					Form Required: *See Below	Yes	Х	No	
City	FLINT	State	MI	Zip	48504	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 732-2620					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 732-6630					If yes, what symbol? Prefer religious			_	
Email	rvance@dioceseoflansing	.org				Benches Permitted:	Yes		No	Х
Contact	RACHEL VANCE	Phone	(810) 732	-2620		Borders Required on Foundation:	Yes	Х	No	
		Ext: 101				At least 1" depending on size of mar	ker			
			Ru	les & Regulati	ons - Installatior	ı Fee				
BEVELS,	BENCHES, LEDGERS AR	E NOT ALI	_OWED.							
SLANT AN	ND UPRIGHT MARKERS 8	MONUME	ENTS ARE	ONLY ALLOW	ED IN CERTAIN	SECTIONS. CONTACT				
СЕМЕТЕ	RY OFFICE TO CONFIRM.	NO CAM	EOS ON FI	LUSH MARKEF	RS. ALL MARKE	RS & MONUMENTS				
ARE SUB	JECT TO CATHOLIC CHU	RCH TEAC	CHINGS AN	ND BELIEFS. '	*ALL MARKER &	MONUMENT DESIGNS				
MUST BE	SUBMITTED TO THE CE	METERY C	OFFICE FO	R APPROVAL	<u>.</u>					
FOUNDA [*]	TION FEE:									
SINGLE -	\$300.00		INFANT -	\$90.00						
COMPAN	ION - \$400.00		VA MARK	ER - \$100.00						
UP TO 32	" FOUNDATION - \$500.00		VA MARK	(ER install on ba	ack of Monument	/Slant - \$220.00				
UP TO 48	" FOUNDATION - \$700.00									
UP TO 52	" FOUNDATION - \$800.00									
UP TO 60	" FOUNDATION - \$900.00			MARKER REI	MOVAL - \$200.00					
OVER 60"	FOUNDATION - CALL FO	R PRICIN	G							
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				

VARIES (FIRST GOOD THAW)

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING ON GROUND FROZEN

NEW HUDSON

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

								-	
Address	MILFORD RD.				Form Required:	Yes		No	Χ
City	LYON TOWNSHIP	State	MI	Zip	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 887-6700				Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 887-4487				If yes, what symbol?			7	
Email					Benches Permitted:	Yes		No	Χ
Contact	MIKE WILLENBERG @	Phone	248) 887	-6700	Borders Required on Foundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANC	CE		2" border required				
			Ru	les & Regulations - Ins	stallation Fee				
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX PER GRA	VE				
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	0.00					
FLUSH SI	ETTING OF GRANITE & E	BRONZE O	N GRANITE	(NO FOUNDATION)					
\$0.50 PSI	, MINIMUM \$175.00								
FOUNDA [*]	TION FEE FOR MONUME	NTS & BR	ONZE ON C	CONCRETE (NON VA)					
\$0.70 PSI	OF FOUNDATION, MININ	MUM \$250.	00						
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT I	BASE.				
ADD 4" T0	O LENGTH AND WIDTH (OF BASE T	O DETERM	IINE FOUNDATION SIZ	'E NEEDED.				
ADD \$50.	00 FOR BUILT IN VASE								
MISCELL	ANEOUS ITEMS								
CORNER	MARKERS (SET OF 4)	\$125.00							
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FOR	R BUILT IN VASE)				
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BURIALS PER	GRAVE: 2-4				
(C	ALL MIKE @ HURON CEI	METERY M	IAINTENAN	ICE FIRST)					
Installatio	on Fee Pavable to:	CASH C	HECK		Spring delivery begins (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

NORTH OXFORD

Address	2600 N. OXFORD ROA	D				Form Required:	Yes	No	o	Χ
City	OXFORD	State	MI	Zip	48371	Grave Location Required on Memorial:	Yes	No	o	Χ
Phone	(248) 628-9787					Symbol Required on Memorial:	Yes	No	o [Χ
Fax	(248) 628-8139					If yes, what symbol?			-	
Email	krichter@oxfordtownshi	p.org				Benches Permitted:	Yes	No	٥	Χ
Contact	KELLY RICHTER @ TOWN H	HAL Phone	(248) 628	-9787		Borders Required on Foundation:	Yes	No	o [Χ
			Ru	iles & Regulat	ions - Installation	Fee				
FOUNDA	TION FEE: .60 PSI									
TOWNSH	IIP RUNS THE CEMETE	RY. GENES	SEE VALLE	Y VAULT PUT	S IN FOUNDATIO	NS.				
Cash Che	ck Credit Card in office									
Notes: #	OF FULL BURIALS PER G	RAVE: 1 # C	F CREMAIN	IS PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE				
In otaliatis	on Ego Boyoble to:					Spring delivery begins (data):				
	on Fee Payable to:					Spring delivery begins (date):				
	TOWNSHIP					WEATHER PERMITTING				
300 DUNI						Fall/Winter Delivery "cutoff" (date):				
OXFORD	, MI 48371					WEATHER PERMITTING				

<u>NORTHVIEW</u>

DEARBORN, MI 48128

Address	600 KENSINGTON					No	Х						
City	DEARBORN	State	MI	Zip	48128	Grave Location Required on Memorial:	Yes	No	Х				
Phone	(313) 565-0005					Symbol Required on Memorial:	Yes	No	Х				
Fax	N/A					If yes, what symbol?		_					
Email	N/A					Benches Permitted:	Yes	No	Х				
Contact	JIM TOMS	Phone	(313) 565	5-0005		Borders Required on Foundation:	Yes	No	Χ				
			Rı	ules & Regulat	ions - Installation	Fee							
NO FOUN	IDATION ORDERS ACCE	PTED BET	WEEN NO	VEMBER 1 AN	ID APRIL 1. NO M	ONUMENT IS TO							
EXCEED	THE SIZE OF SLANT 36 "	'x 10"x 16"	ON A BAS	SE 48"x 14"x 6	". SUPERINTEND	DENT MUST BE							
PRESEN [*]	T WHEN MEMORIAL IS S	ET. NEED	APPROVA	AL FROM CEM	ETERY PRIOR TO	PRODUCTION AND							
DELIVER	DELIVERY OF MEMORIAL.												
SINGLE (GRAVE MARKERS SHOU	LD BE EITI	HER 24"x 1	2"x 4" FLAT O	R 24"x 10"x 16" SL	ANT. BASES FOR							
SLANTS	ARE NO LONGER ACCE	PTED.											
FOUNDA	TION FEE:												
16"x 10" (BABY) - \$250.00												
24"x 12" -	\$300.00												
36"x 14" -	\$400.00												
48"x 14" -	\$500.00												
Notes: #	OF FULL BURIALS PER GR	AVE: #O	F CREMAIN	S PER GRAVE:	OR FULL AND	CREMATION PER GRAVE							
									-				
Installatio	on Fee Payable to:					Spring delivery begins (date):							
NORTHV	IEW CEMETERY					APRIL 1ST - 48 HR NOTICE PRIOR TO	O DELIVER'	Y					
600 KENS	SINGTON					Fall/Winter Delivery "cutoff" (date):							

NOVEMBER 1ST

OAK GROVE - CHELSEA

Address	P.O. BOX 416					Form Required:	Yes		No	Х
City	CHELSEA	State	MI	Zip	48118	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 475-3322					Symbol Required on Memorial:	Yes		No	Х
Fax	N/A					If yes, what symbol?			•	
Email	NMYERS1017@SBCGL0	OBAL.NET				Benches Permitted:	Yes	Х	No	
Contact	NANCY MYERS	Phone	(734) 475-	3322		Borders Required on Foundation:	Yes	ļ	No	
						2" border on all sides measured from widest	portion	of base		
			Rules	& Regulation	ns - Installation Fe	ee Cash and Checks are accepted				
FLUSH, B	EVEL, BENCHES AND M	ONUMENT	S							
FOUNDA	TION FEE: .60 PSI									
VETERAN	N'S PLAQUE INSTALLATION	ON FEE - \$	100.00							
FOUNDA [*]	TIONS POURED 1X MON	TH PROVII	DED CEME	TERY HAS AT	LEAST 3 FOUND	ATIONS TO POUR.				
Notes: # 0	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAINS	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
										1
	on Fee Payable to:					Spring delivery begins (date):				
OAK GRO	OVE CEMETERY					WEATHER PERMITTING				
P.O. BOX	416					Fall/Winter Delivery "cutoff" (date):				
CHELSE/	A, MI 48118					OCTOBER 15th				

OAK GROVE - DIXBORO

Address	415 S. OBSERVATORY -	(ON CURV	E BY FOX F	HILLS)		Form Required:	Yes	No	Х
City	ANN ARBOR	State	MI	Zip	48104	Grave Location Required on Memorial:	Yes	No	Х
Phone	(734) 663-5018					Symbol Required on Memorial:	Yes	No	Х
Fax	(734) 663-2847					If yes, what symbol?		_	
Email	bradbouchie@ymail.com					Benches Permitted:	Yes X	No	
Contact	BRAD BOUCHIE	Phone	(734)274	-7422		Borders Required on Foundation:	Yes	No	Х
						2" border on all sides			
			Rı	ules & Regulati	ons - Installation	Fee			
FOUNDA'	TION FEE:								
.65 PSI, M	//INIMUM \$200.00								
BRONZE,	, FLUSH GRANITE, SLANT	ΓS, BEVEL	S, AND MO	ONUMENTS					
34" MAXII	MUM FOR SINGLE								
MIN 4" TH	HICK GRANITE/MARBLE.	ALL MEMC	RIALS MU	JST COMPLY W	ITH THE CEMET	ERY APPEAL,			
NON TRA	ADIONAL MONUMENTS W	ILL NEED	TO BE AP	PROVED BEFO	RE PLACEMENT				
(THE CEN	METERY HAS A RIGHT TO	REMOVE	OR NOT	ACCEPT AN U	NDESIRED MONU	JMENT)			
Notoo: # (\/F. 4 # OI	CDEMAIN	C DED CDAVE.		CREMATION REP CRAVE			
Notes. #	OF FULL BURIALS PER GRA	VE. I # OI	CREMAIN	S PER GRAVE. 2	OR I FULL AND I	CREMATION PER GRAVE			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
BRAD BO	UCHIE					WEATHER PERMITTING			
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):			
CLINTON	l, MI 49236					OCTOBER 1ST			

OAK GROVE - MILFORD

					_	ъ				l	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Address					For	rm Required:		Yes		No	Х		
City	MILFORD	State	MI	Zip	Gra	ave Location Require	d on Memorial:	Yes		No	Χ		
Phone	(248) 887-6700				Syr	mbol Required on Me	emorial:	Yes		No	Χ		
Fax	(248) 887-4487					If yes, what symbol? _				_			
Email					Bei	nches Permitted:	Call contact	Yes	Х	No			
Contact	MIKE WILLENBERG @	Phone	248) 887-	-6700	Вог	rders Required on Fo	oundation:	Yes	Х	No			
HCM	HURON CEMETERY MA	INTENANO	CE			2" border on all sides							
			Ru	les & Regulations - In	stallation Fee	9							
BRONZE,	, FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX PER GRA	AVE								
GOVERN	MENT ISSUED MARKERS	3 - ALL TYF	PES\$25	0.00									
	LUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION) 0.50 PSI, MINIMUM \$175.00												
		NITO A DD	0N3E 0N 0	SOMODETE (MONUMA)									
	TION FEE FOR MONUME			CONCRETE (NON VA)									
\$0.70 PSI	OF FOUNDATION, MININ	ЛUM \$250.	00										
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT	BASE.								
ADD 4" To	O LENGTH AND WIDTH C	OF BASE T	O DETERM	IINE FOUNDATION SIZ	ZE NEEDED.								
ADD \$50.	00 FOR BUILT IN VASE												
MISCELL	ANEOUS ITEMS												
CORNER	MARKERS (SET OF 4)	\$125.00											
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FO	R BUILT IN V	ASE)							
Notes: #	otes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2-3												
(C	(CALL MIKE @ HURON CEMETERY MAINTENANCE FIRST)												
				,									
Installatio	on Fee Payable to:	CASH, CH	HECK		Spi	ring delivery begins	s (date):						

HURON CEMETERY MAINTENANCE <u>CC VIA PHONE</u>
P.O. BOX 112
HIGHLAND, MI 48357

Spring delivery begins (date):
WEATHER PERMITTING
Fall/Winter Delivery "cutoff" (date):
WEATHER PERMITTING

OAK HILL

Address	216 UNIVERSITY DRIVE					Form Required: FORM Yes X No					
City	PONTIAC	State	MI	Zip	48342	Grave Location Required on Memorial:	Yes		No	Х	
Phone	(248) 623-7705					Symbol Required on Memorial:	Yes		No	Χ	
Fax	(248) 623-7742					If yes, what symbol?			-		
Email	mmoussa@covenantcem	etery.com				Benches Permitted:	Yes	Х	No		
Contact	OTTAWA PARK IS OFFICE SITE FOR THIS CEMETER		(248) 758- (248) 623-			Borders Required on Foundation:	Yes		No	Х	
			Ru	les & Regula	tions - Installatior	n Fee					
FOUNDA	TION FEE:										
FLUSH M	ARKERS - \$1.50 PSI, MIN	IMUM OF	\$432.00								
BEVELS,	SLANTS, BENCHES AND	MONUME	NTS - \$1.50	PSI MINIMU	M of \$432.00						
DOUBLE	INTERMENT SITES REQU	JIRE A 16"	x 24" DOUE	BLE INTERME	ENT MEMORIAL C	F GRANITE AND/OR					
BRONZE	ON GRANITE.										
ALL BENG	CHES, MONUMENTS, SLA	ANT MARK	ERS AND E	BRONZE MAR	RKERS MUST HAV	/E A Matching					
GRANITE	BASE. THEY WILL NOT	BE ACCE	PTED WITH	HOUT A MATO	CHING BASE.						
VASES M	UST BE PREAPPROVED.	VASES M	IUST BE A	PART OF TH	E MONUMENT AN	ID MUST BE					
GRANITE	OR BRONZE.										
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE	: 2 OR 1 FULL AND	2 CREMAINS PER GRAVE					
Installatio	on Fee Payable to:					Spring delivery begins (date):					
OAK HILL	. CEMETERY					WEATHER PERMITTING (USUALLY A	PRIL 1	1ST)			
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):					

WEATHER PERMITTING

OAK RIDGE

Address	23723 TELEGRAPH ROAD					Form Required:	Yes		No	Х				
City	FLAT ROCK	State	MI	Zip	48134	Grave Location Required on Memorial	Yes		No	Х				
Phone	(734) 675-0660					Symbol Required on Memorial:	Yes		No	Χ				
Fax	(734) 675-0661					If yes, what symbol?								
Email	N/A					Benches Permitted: Call first	Yes		No	Х				
Contact	AL BRADFORD	Phone Cell	(734) 675 (734) 775			Borders Required on Foundation:	Yes		No	Х				
			Rı	ules & Regulat	ions - Installation	Fee								
FLUSH, S	FLUSH, SLANTS AND MONUMENTS. <u>FLUSH ONLY IN SECTION F</u> . ALWAYS CALL CEMETERY TO VERIFY SIZE AND PRICE.													
<u>ALWAYS</u>	CALL CEMETERY TO VE	RIFY SIZE	AND PRI	CE.										
FOUNDA	TION FEE:													
24"x 12"x	4" - \$300.00													
48"x 12"x	4" (Double Flush or Slant I	NO BASE)-	\$600.00											
SLANTS	& MONUMENTS UP TO 4'	BASE - \$6	80.00			MUST OWN 6 ADJOINING GRAVES FOR	MONU	MENT_						
MONUME	NTS UP TO 5' BASE - \$74	40.00												
MONUME	ENTS UP TO 6' BASE - \$80	00.00				MAX OVER ALL HEIGHT 3'6" (WITH 6" I	BASE)							
VASE INS	STALLATION \$250													
NO VA BI	RONZE MOUNTED TO UP	RIGHTS												
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	NS PER GRAVE:	: 3 OR 1 FULL AND	2 CREMAINS PER GRAVE								
Installatio	on Fee Payable to:					Spring delivery begins (date):								
	GE CEMETERY					WEATHER PERMITTING								
	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):								
	· · · - · · - · · - · · · · · · · ·					WEATHER PERMITTING								

OAKLAND HILLS MEMORIAL GARDENS

Address	43300 WEST 12 MILE RI	D .				Form Required: FORM	Yes	X	No			
City	NOVI	State	MI	Zip	48377	Grave Location Required on Memorial:	Yes	Х	No			
Phone Fax	(248) 349-2784 (248) 349-2826					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Χ		
Email	mscharr@oaklandhillsmi.	<u>com</u>				Benches Permitted:	Yes	Х	No			
Contact MMG	MELISSA SCHARR	Phone	(248) 34	49-2784		Borders Required on Foundation:	Yes		No	Х		
			F	Rules & Regu	ulations - Installatio	n Fee						
BRONZE	ONLY. ALL BRONZE MU	ST BE MO	UNTED (ON A 4" THIC	K GRANITE BASE E	BEFORE DELIVERY TO CEMETERY.						
BENCHE	S PERMITTED ANYWHE	RE IN CEM	IETERY I	MUST HAVE	GRANITE BASE.							
MONUME	TS IN DESIGNATED AREAS ONLY.											
36" SING	GRAVE. "MONUMENTS WITHIN OWNERS PROPERTY" ANY COLOR ALLOWED.											
ON FLUS	N FLUSH MARKERS, ONLY CAMEOS CONSTRUCTED OF STEEL ARE PERMITTED.											
	FEES:											
	Flagging Fee:	\$175.00 F	Payable to	o Oakland Hill	ls Memorial Gardens							
	Setting Fee:	\$1.00 PS	l payable	to Inch Memo	orials							
	Foundation Fee:	\$1.00 PS	l Payable	to Oakland H	Hills Memorial Garder	าร						
1.00 PSI I	FOR MONUMENTS AND E	BENCHES										
MEMORIA	AL REMOVAL FEE - \$75.0	0										
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CF	REMAINS PER	R GRAVE: 3							
Foundati	on Fee Payable to:					Spring delivery begins (date):						
	ON FEE FAYADIE 10. D HILLS MEMORIAL GARI	DENG				WEATHER PERMITTING						
		טבואס										
(SAIVIE AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):						
						NOVEMBER 1ST (BUT FLEXIBLE)						

OAKVIEW

(SAME ADDRESS AS ABOVE)

Address	ss 1032 NORTH MAIN STREET					Form Required: FORM Yes X			Χ	No	
City	ROYAL OAK	State	MI	Zip	48067	Grave Location Required of	n Memorial:	Yes		No	Х
Phone	(248) 541-0139					Symbol Required on Memo	orial:	Yes		No	Χ
Fax	(248) 541-0574					If yes, what symbol?					
Email	jbooms@oakviewmi.com					Benches Permitted:	Call prior	Yes	Χ	No	
Contact MMG	JANICE BOOMS	Phone	(248) 541	-0139		Borders Required on Foun	dation:	Yes		No	Х
			Ru	les & Regulati	ions - Installation	Fee					
FLUSH G	RANITE AND BRONZE. M	ONUMEN	TS & BENC	CHES ALLOWE	ED IN DESIGNATI	ED AREAS ONLY.					
MONUME	ENTS MUST BE 6" OR THI	CK. BRON	NZE MUST	BE ON GRANI	ITE BASE. ANY C	OLOR GRANITE					
BRONZE	BASE ALLOWED. MAXIM	IUM BABY	20"x 10". F	FOUNDATION	FEE BASED ON	SIZE OF GRANITE.					
	FEES:										
	Flagging Fee:	\$175.00 F	Payable to C	Dakview Ceme	tery						
	Setting Fee:	\$1.00 PS	I payable to	Inch Memorial	ls						
	Foundation Fee:	\$1.00 PS	l Payable to	Oakview Cem	netery						
ALL SIZE	S, BENCHES & MONUME	NTS NEE	D PRIOR A	PPROVAL FRO	OM CEMETERY						
20"x 10" -	(BABY)										
MINIMUN	I SIZE FOR COMPANION	IS 36"x 12	"								
1.00 PSI I	FOR MONUMENTS										
Notes: #	OF FULL BURIALS PER GRA	VE: CALL C	EMETERY I	REGARDING W	HAT IS ALLOWED.						
Flagging	Fee Payable to:					Spring delivery begins (d	late):				
	/ CEMETERY					WEATHER PERMITTING	•	/ ADDII	15TU	1	

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 30TH

OAKWOOD - FARMINGTON

Address	34200 GRAND RIVER					Form Required:	Yes		No	Х		
City	FARMINGTON	State	MI	Zip	48335	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(248) 474-5500					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(248) 473-7261					If yes, what symbol?						
Email	mmullison@farmgov.com					Benches Permitted:	Yes	Х	No			
Contact	CLERKS OFFICE Mary Mullison	Phone	(248) 474 EXT.2218	-5500 5 / 2225 / 2228		Borders Required on Foundation:	Yes		No	Х		
			Ru	les & Regulati	ions - Installation	Fee						
GRANITE & BRONZE. CALL FOR MONUMENTS. BRONZE MUST BE MOUNTED ON GRANITE ONLY (NO CEMENT) BEFORE DELIVERY TO												
	RY. FAMILY TO VERIFY L					,						
DELIVER	Υ.											
FOUNDA	TION FEE:											
SINGLE (JP TO 42"x 18" - \$175.00											
DOUBLE	UP TO 60"x 18" - \$300.00											
.50 PSI IF	LARGER THAN 60"x 18"											
https://ww	w.farmgov.com/City-Servic	es/City-Cle	erk/Oakwoo	d-Cemetery.as	spx .							
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAINS	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):						
CITY OF	FARMINGTON					WEATHER PERMITTING						
23600 LIE	BERTY					Fall/Winter Delivery "cutoff" (date):						
FARMING	STON, MI 48335					WEATHER PERMITTING						

OAKWOOD - FENTON

Address	S DAVIS ST. (SOUTH OF SHIAWASSEE AVE.)					Form Required:	Yes		No	Х
City	FENTON	State	MI	Zip	48430	Grave Location Required on Memorial:	Yes		No	Х
	(810) 629-2261 - CITY OF					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 629-2004 - CITY OF FENTON					If yes, what symbol?			-	
Email	cfirman@covenantcemete	ery.com				Benches Permitted:	Yes	Х	No	
	CATHY FIRMAN (Tues-Sat) JUDY (Mondays) - (810) 6					Borders Required on Foundation:	Yes		No	Х
Rules & Regulations - Installation Fee										
FLUSH GRANITE (SAWN SIDES), BRONZE, BEVELS, SLANTS, MONUMENTS.										
BABYLAND IS FLUSH ONLY - 16"x 8"x 4".										
INSTALLATION FEE: .75 PSI - MINIMUM \$216.00										
FOR BURIAL PURCHASES/ARRANGEMENTS, CONTACT:										
BARB BISBEE										
AT COVENANT CEMETERY SERVICE										
(810) 577-1184										
Cathy Firman cfirman@covenantcemetery.com										
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE										
Installation	n Fee Pavable to: OAKI	NOOD CE	METERY			Spring delivery begins (date):				
Installation Fee Payable to: OAKWOOD CEMETERY Mail to: OAKWOOD CEMETERY						APRIL 15TH				
2020 E. HILL RD.						Fall/Winter Delivery "cutoff" (date):				
2020 L. 1111	AND BLANC, MI 48439					WEATHER PERMITTING				

<u>ORTONVILLE</u>

Address	175 N. ORTONVILLE RD					Form Required:	Yes		No	Х
City	ORTONVILLE	State	MI	Zip	48462	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(248) 627-8413 N/A					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х
Email	ortonvillecemeteryoffice@	gmail.com				Benches Permitted: On Lot	Yes	Х	No	
Contact http://www	v.ortonvillecemetery.com/p	Phone ricing.html				Borders Required on Foundation:	Yes		No	Х
			R	ules & Regulati	ions - Installation	ı Fee				
FLUSH, E	BEVELS, SLANTS. FOUND	DATIONS A	ARE 12" TI	HICK WITH 24"	POST DOWN CE	NTER.				
FOUNDA	TION FEE: .50 PSI PLUS	\$150.00 B	ASE FEE.	CALL FOR MC	NUMENTS.					
Notes: #	OF FULL BURIALS PER GRA	AVF:1 #0	F CREMAII	NS PER GRAVE	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
1101001 11			TOTAL TOTAL	1101 211 010 112	2 011 11 022 71110	- ONE-MINION EN GRAVE				
Installatio	on Fee Payable to: Cash a	and Check	s Only			Spring delivery begins (date):				
ORTONV	ILLE CEMETERY					APRIL 1ST				
P.O. BOX	433					Fall/Winter Delivery "cutoff" (date):				
ORTONV	ILLE. MI 48462					WEATHER PERMITTING				

<u>OTISVILLE</u>

Address						Form Required:	Yes		No	Х	
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:			No	Х	
Phone	(734) 699-8900 ext 6			•		Symbol Required on Memorial:	Yes		No	Х	
Fax	(734) 699-5213					If yes, what symbol?					
Email	bbeaudry@vanburen-mi.c	org				Benches Permitted:	Yes		No	Х	
Contact	BRITTANY BEAUDRY	Phone	(734) 699	-8909		Borders Required on Foundation:	Yes		No	Χ	
_											
			Ru	les & Regulat	ions - Installatior	Fee					
CHARTE	R TOWNSHIP OF VAN BU	IREN, KIRI	K, CHUCK (OR SAM, TO S	STAKE GRAVE. T	HE FAMILY IS					
RESPON	SIBLE FOR FOUNDATION	I/INSTALL	ATION. NO	SUNDAY OR	HOLIDAY BURIA	LS.					
INCH TO	INSTALL FOUNDATIONS:	: \$1.00 PSI									
FOLINDATION FEE, \$50.00 (MADIZING AND INCRECTION)											
FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)											
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE					
	For Board 1 4 Ct 1	- 0!									
	on Fee Payable to: Check	•				Spring delivery begins (date):					
	R TOWNSHIP OF VAN BU	IKEN				APRIL 1ST					
46425 TYLER ROAD						Fall/Winter Delivery "cutoff" (date):					
BELLEVILLE, MI 48111 NOVEMBER 30TH											

<u>OTTAWA PARK</u>

Address	6180 DIXIE HIGHWAY	,				Form Required: FORM	Yes	Х	No	
City	CLARKSTON	State	MI	Zip	48346	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 623-7705					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 623-7742					If yes, what symbol?			_	
Email	mmoussa@covenantce	emetery.com	_			Benches Permitted:	Yes	Χ	No	
						Borders Required on Foundation:	Yes		No	Х
				Rules & Reg	ulations - Installa	tion Fee				
FOUNDA	TION FEE:									
FLUSH M	ARKERS - 1.50 PSI, MI	NIMUM OF \$	432.00							
BEVELS,	SLANTS, BENCHES AN	ND MONUME	ENTS - S	1.50 PSI MIN	IMUM of \$432.00					
	INTERMENT SITES RE ON GRANITE.	QUIRE A 16	"x 24" D	OUBLE INTER	RMENT MEMORIA	L OF GRANITE AND/OR				
ALL BEN	CHES, MONUMENTS, S	SLANT MARI	KERS AI	ND BRONZE N	MARKERS MUST I	HAVE A Matching				
GRANITE	BASE. THEY WILL NO	OT BE ACCE	PTED V	VITHOUT A M	ATCHING BASE.					
VASES M	IUST BE PREAPPROVE	ED. VASES I	MUST B	E A PART OF	THE MONUMENT	AND MUST BE				
GRANITE	OR BRONZE. NO VAS	SES ON FLU	SH MAF	RKERS						
Notes: #	OF FULL BURIALS PER G	RAVE: 1 # O	F CREM	AINS PER GRA	VE: 3 OR 1 FULL AI	ND 2 CREMATIONS PER GRAVE				
										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
OTTAWA	PARK CEMETERY					WEATHER PERMITTING				
(SAME ADDRESS AS ABOVE)				Fall/Winter Delivery "cutoff" (date):						
(SAME ADDRESS AS ABOVE)						WEATHER PERMITTING				

OUR LADY OF HOPE

Installation Fee Payable to:

(SAME ADDRESS AS ABOVE)

OUR LADY OF HOPE

Address	18303 ALLEN RD.					Form Required: FORM	Yes	Χ	No	
City	BROWNSTOWN	State	MI	Zip	48193	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 285-2155					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 285-6510					If yes, what symbol?				
Email	mariles.lori@aodcemeter	ies.org				Benches Permitted:	Yes	Х	No	
	LORI MARILES JULIE SENKOWSKI - se	Phone nkowski.ju	(734) 285- lie@aodce			Borders Required on Foundation:	Yes		No	Х
			Rul	les & Regulati	ons - Installation	Fee				
ONLY GR	ANITE MARKERS ALLOV	VED (NO B	RONZE) AN	ND MUST BE A	APPROVED BY C	EMETERY. 24"x 12"x 4" ON A 48"x 12"x	4"			
ALL MON	UMENTS, BENCHES AND	DRAWING	SS MUST E	BE APPROVED	IN ADVANCE. N	IO MONUMENTS IN SECTION 4. NO M	ONUM	ENTS		
GREATER	R THAN 7'. STAINLESS S	TEEL AND	LASER PH	OTOS ALLOW	ED. NO VASES A	LLOWED OTHER THAN WHAT CEMET	ΓERY	ALLOV	۷S.	
NO SLAN	TS, HALF LEDGERS OR	LEDGERS A	ALLOWED.							
FOUNDAT	ΓΙΟΝ FEE:									
16"x 10"x	4" OR 18"x 10"x 4" - \$300	.00 INFANT	-							
FLUSH 24	"x 12"x 4" - \$475.00									
FLUSH 48	3"x 12"x 4" - \$630.00									
MONUME	NTS - WITH PRIOR APPI	ROVAL AN	D ADDITIO	NAL LOT UPO	RADE FEE:					
BASE 24"	x 12" - \$500.00									
BASE 48"	x 14" - \$1,000.00									
BASE 60"	x 14" - \$1,250.00									
BASE 66"	x 14" - \$1,375.00									
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CRE	MAINS PER GI	RAVE: 5					

VISA & MASTERCARD ACCEPTED

Spring delivery begins (date):

Fall/Winter Delivery "cutoff" (date):

APRIL 1ST

NOVEMBER 1ST

OXBOW LAKESIDE

Addross	ELIZABETH LAKE RD.					Form Required:		Yes		No	V
		0	B 41	 -		·				1	X
City	WHITE LAKE	State	MI	Zip		Grave Location Requir				No	X
Phone Fax	(248) 887-6700 (248) 887-4487					Symbol Required on M		Yes		No	Χ
	(240) 007-4407					If yes, what symbol?				1	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @		(248) 887-	6700		Borders Required on F	oundation:	Yes	Χ	No	
HCM	HURON CEMETERY MA	INTENANC	E 			2" bord	ler on all sides				
			Rul	es & Regulations - In	stallation	Fee					
\$0.75 PSI	OF FOUNDATION										
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREM	IATION BURIALS PER	R GRAVE:	2-4					
(C	ALL MIKE @ HURON CEN	METERY M	AINTENAN	CE FIRST)							
					Ī						1
Installation	on Fee Payable to:					Spring delivery beging	ıs (date):				
HURON (CEMETERY MAINTENANC	CE				WEATHER PERMITTI	NG				
P.O. BOX	112					Fall/Winter Delivery "	cutoff" (date):				
HIGHLAND, MI 48357 WEATHER PERMITTING											

OXFORD TOWNSHIP

									1	
Address	300 DUNLAP ROAD					Form Required:	Yes		No	Х
City	OXFORD	State	MI	Zip	48371	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 628-9787					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 628-8139					If yes, what symbol?				
Email	krichter@oxfordtownsh	ip.org				Benches Permitted:	Yes		No	Χ
Contact	KELLY RICHTER @ TOWN	HAL Phone	(248) 6	628-9787		Borders Required on Foundation:	Yes		No	Х
				Rules & Reg	julations - Installa	tion Fee				
FOUNDA	TION FEE: .60 PSI									
TOWNSH	IIP RUNS THE CEMETE	RY. GENES	SEE VAL	LEY VAULT I	PUTS IN FOUNDA	ΓΙΟΝS.				
Cash Check Credit Card in office										
Notes: #	OF FULL BURIALS PER C	SRAVE: 1 # (OF CREM	IAINS PER GR	AVE: 2 OR 1 FULL A	ND 1 CREMATION PER GRAVE				
Installation	on Fee Payable to:					Spring delivery begins (date):				
OXFORD TOWNSHIP					WEATHER PERMITTING					
300 DUNI	300 DUNLAP RD.				Fall/Winter Delivery "cutoff" (date):					
300 DUNLAP RD. OXFORD, MI 48371						WEATHER PERMITTING				

PARKVIEW MEMORIAL

Installation Fee Payable to:

(SAME ADDRESS AS ABOVE)

PARKVIEW MEMORIAL CEMETERY

Address	34205 FIVE MILE RD.					Form Required: FORM		Yes	Χ	No	
City	LIVONIA	State	MI	Zip	48154	Grave Location Required on	Memorial:	Yes	Χ	No	
Phone	(734) 421-6120					Symbol Required on Memo	orial:	Yes	Χ	No	
Fax	(734) 421-5109					If yes, what symbol? LOT	NUMBER				
Email	info@parkviewlivonia.com	<u>l</u>				Benches Permitted:		Yes		No	Χ
Contact	ERIN (office manager)					Borders Required on Founda	ation:	Yes		No	Χ
	MARY STOCK (markers)	mary@pa	<u>rkviewlivoni</u>	a.com							
			Rul	es & Regulati	ons - Installation	Fee					
NO GRAN	IITE BASES FOR <u>BRONZ</u>	E MARKEF	R S , BRONZ	E CAST PHOT	TOS ONLY - NO R	AISED PHOTOS.	FLUSH G	RANITE	MAF	RKERS	
MUST HA	VE PHOTO WAIVER FRO	M GRAVE	OWNER. N	IO LONGER R	REFINISH BRONZ	E	ALLOWE) IN 2 S	SIZES	-	
NO VASE	ON 24"x 12". VASES ARE	E ALLOWE	D ON 24"x	13" & 24"x 14"	•		24"x12"x 4	l" and			
FOUNDA ⁻	ΓΙΟΝ FEE FOR 16"x 24" - Ι	DOUBLE IN	NTERMENT	- \$300.00 + 6	% SALES TAX		36"x 12"x	4" ONL	Y.		
24"x 12" C	OR 24"x 14" - \$250.00 + 6%	SALES TA	AX = \$265.0	00			INSTALLA	TION F	EES:		
VA MARK	ER - \$250.00 + 6% SALES	TAX					24"x 12"x	4" - \$20	0.00	(no tax)	
24"x 30" V	VITH OR WITHOUT VASE	AND HALI	FLEDGER	- \$300.00 + 6%	% SALES TAX		36"x 12"x	4" - \$30	0.00	(no tax)	
FULL LED	OGERS ARE ACCEPTED V	WITH PERI	MISSION S	IGNED.							
DOUBLE	UP TO 44"x 14" - \$300.00	+ 6% SALE	STAX								
WILL ACC	CEPT 36"x 13" AS COMPA	NION OVE	R 2 GRAVE	S							
2 NAMES	ON SINGLE MARKER - C	AN USE 24	l"x12" or 24	"x 14"							
3 MARKE	RS ALLOWED ON 1 GRAV	/E - 3RD M	IARKER @	FOOT OF TH	E GRAVE						
MUST HA	VE LOT NUMBER CAST	ON LOWE	R RIGHT H	AND CORNER	R OF THE MEMOR	RIAL.					
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	S PER GRAVE:	3 OR 1 FULL AND 2	CREMAINS PER GRAVE					

Spring delivery begins (date):

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 15th (NO WINTER DELIVERY)

APRIL 15TH

PARSHALLVILLE

P.O. BOX 112

HIGHLAND, MI 48357

						1		
Address			Form Required:	Yes		No	Х	
City	HARTLAND TOWNSHIP State MI Zip		Grave Location Required on Memorial:	Yes		No	Χ	
Phone	(248) 887-6700		Symbol Required on Memorial:	Yes		No	Χ	
Fax	(248) 887-4487		If yes, what symbol?			_		
Email			Benches Permitted: Call contact	Yes		No		
Contact	MIKE WILLENBERG @ Phone (248) 887-6700		Borders Required on Foundation:	Yes	Х	No		
HCM	HURON CEMETERY MAINTENANCE		2" border on all sides			_		
	Rules & Regulations - In	nstallation	Fee					
BRONZE,	, FLUSH GRANITE, SLANTS, AND MONUMENTS - 36" MAX PER GRA	AVE						
GOVERN	MENT ISSUED MARKERS - ALL TYPES\$250.00							
FLUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)								
\$0.50 PSI, MINIMUM \$175.00								
FOUNDA	TION FEE FOR MONUMENTS & BRONZE ON CONCRETE (NON VA)	<u>)</u>						
\$0.70 PSI	OF FOUNDATION, MINIMUM \$250.00							
ALL FOU	NDATIONS MUST BE 2" LARGER ON ALL SIDES THAN MONUMENT	BASE.						
ADD 4" T	O LENGTH AND WIDTH OF BASE TO DETERMINE FOUNDATION SI	IZE NEEDE	ED.					
ADD \$50.	00 FOR BUILT IN VASE							
MISCELL	ANEOUS ITEMS							
CORNER	MARKERS (SET OF 4)\$125.00							
VASE ON	ILY\$100.00 (ADD \$50.00 FOR ALL FEES FO	R BUILT II	N VASE)					
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2-3								
(C	ALL MIKE @ HURON CEMETERY MAINTENANCE FIRST)							
		<u>.</u>						
Installatio	on Fee Payable to: <u>CASH, CHECK</u>		Spring delivery begins (date):					
HURON (HURON CEMETERY MAINTENANCE CC VIA PHONE WEATHER PERMITTING							

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

PERRY MOUNT PARK

(SAME ADDRESS AS ABOVE)

										_	
Address	878 NORTH PERRY ST.					Form Required: FORM		Yes	X	No	
City	PONTIAC	State	MI	Zip	48340	Grave Location Required	on Memorial:	Yes		No	Х
Phone	(248) 334-1563					Symbol Required on Men	norial:	Yes		No	Х
Fax	(248) 334-1872					If yes, what symbol?				_	
Email	PERRYMOUNTPARK@A	TT.NET				Benches Permitted:	Call first	Yes	Х	No	
Contact		Phone	(248) 334	-1563		Borders Required on Fou	indation:	Yes		No	Х
			Ru	les & Regulat	ions - Installation	Fac					
FLUSH O	NLY, GRANITE OR BRON	ZE. NO PI		•							
	D. NO COLOR OR CERAI										
	ENTS IN DESIGNATED AR										
MONUME	ENT SPACE. ANY COLOR	GRANITE	BASES AL	LOWED. TW	O SINGLE BRONZ	ZE MAY BE MOUNTED					
ОИ СОМ	PANION GRANITE BASE.					30" MAX FOR SIN	IGLES				
FOUNDA	TION FEE:					30" MAX FOR SIN 60" MAX FOR DO	JBLES				
FOUNDAT	IONS CALCULATED AT: LEN	IGTH (see r	ed chart on	right>) X WII	DTH (18") X 1.00	FOUNDATION FEES:					
24"x 12"x 4	1", 20"x 10"x 4", 12"x 12" - \$32	25.00				2' 8" = 32" - \$576.00 2' 10" = 34" - \$612.0	0 4' 2" = 50				
COMPANI	ON FLUSH MARKERS - \$600	.00				3' 0" = 36" - \$648.00 3' 4" = 40" - \$720.00					
BRONZE S	SAME PRICING AS GRANITE					3' 6" = 42" - \$756.00 3' 8" = 44" - \$792.00	4' 8" = 56'	" - \$100	08.00		
MONUME	NTS CALL FOR PRICING.					3' 10" = 46" - \$828.0					
BENCHES	ALLOWED 42"x 14"x 8" COM	PANION &	SINGLE								
MONUME	NTS & BENCHES + 2" SQ. IN.										
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	S PER GRAVE:	3 OR 1 FULL AND 2	CREMAINS PER GRAVE				5/	/1/2024
Installatio	on Fee Payable to:					Spring delivery begins	(date):				
	OUNT PARK CEMETERY					YEAR ROUND DELIVER	•				

Fall/Winter Delivery "cutoff" (date):

YEAR ROUND DELIVERY

PINCKNEY

										1	
Address	WEST MAIN STREET (W	EST M-36)				Form Required:	Yes		No	Х
City	PINCKNEY	State	MI	Zip	48169		Grave Location Required on Memorial:	Yes		No	Х
Phone	N/A						Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A						If yes, what symbol?				
Email	NBMEMORIALS@AOL.C	<u>OM</u>					Benches Permitted:	Yes		No	Х
Contact	GARY NICHOLAS (Sexton)	Phone	(734)	878-2940			Borders Required on Foundation:	Yes	Х	No	
							2" border required on all side	s			
				Rules & F	Regulations - In	stallation	Fee				
FOUNDA [*]	TION FEE:										
	 _US 2" ON EACH SIDE, \$1	50.00 MIN	IIMUM								
	•										
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OI	F CREM	AINS PER C	GRAVE: 2 OR 1 F	ULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:						Spring delivery begins (date):				
GARY NIC	CHOLAS						MAY 15TH				
832 PUTNAM ST.							Fall/Winter Delivery "cutoff" (date):				
PINCKNEY, MI 48169							OCTOBER 15TH				

PINE LAKE

Address	4351 MIDDLEBELT & LO	NE PINE				Form Required:		Yes		No	Х
City	WEST BLOOMFIELD	State	MI	Zip	48323	Grave Location Require	ed on Memorial:	Yes		No	Х
Phone	(248) 496-9948					Symbol Required on M	emorial:	Yes		No	Χ
Fax	(248) 887-9579					If yes, what symbol?					
Email	mbem.pgpp@gmail.com					Benches Permitted:	Call contact	Yes		No	Х
Contact	MARI BEM	Phone	(248) 49	96-9948		Borders Required on F	oundation:	Yes	Х	No	
						2" bord	er on all sides				
			F	Rules & Re	gulations - Installation	on Fee					
BRONZE,	, FLUSH GRANITE, SLAN	ΓS, AND N	IONUME	NTS - 30" N	MAX PER GRAVE						
GOVERN	MENT ISSUED MARKERS	3 - ALL TY!	PES\$:	<u>250.00</u>			30" MAX	FOR SII	NGLES	٦	
FLUSH S	ETTING OF GRANITE & B	RONZE O	N GRANI	ITE (NO FC	OUNDATION)		60" MAX F				
\$0.65 PSI	I, MINIMUM \$175.00 - ADD	\$40.00 F	OR BUILT	Γ IN VASE							
FOUNDA [*]	TION FEE FOR MONUME	NTS & BR	ONZE ON	N CONCRE	TE (NON VA)						
\$0.80 PSI	OF FOUNDATION, MINIM	ИUM \$300.	00								
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SII	DES THAN	MONUMENT BASE.						
ADD 4" To	O LENGTH AND WIDTH C	F BASE T	O DETER	RMINE FOL	JNDATION SIZE NEE	DED.					
ADD \$40.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$150.00									
VASE ON	ILY	\$100.00)								
Notes: #	OF FULL BURIALS PER C	3RAVE: 1	# OF CR	EMATION	BURIALS PER GRAV	E: 2-3					
										4-5	-23
						_					
Installatio	on Fee Payable to: CAS	H or CHE	CKS ONI	LY - Made	out to:	Spring delivery begin	s (date):				
MARI BEI	М					WEATHER PERMITTI	NG				
PO Box 1	22					Fall/Winter Delivery "	cutoff" (date):				
MILFORD), MI 48381					WEATHER PERMITTI	NG				

PLEASANT VALLEY

								_	_	
Address	W. SIDE OF PLEASANT VA	LLEY RD, N	N. OF JACC	BY RD.	Form Required:		Yes		No	Χ
City	BRIGHTON	State	MI	Zip	Grave Location Requi	red on Memorial:	Yes		No	Χ
Phone	(248) 887-6700				Symbol Required on M	Memorial:	Yes		No	Χ
Fax	(248) 887-4487				If yes, what symbol?				_	
Email					Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @		e (248) 887	7-6700	Borders Required on I	oundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANO	CE		2" bor	der on all sides				
			R	ules & Regulations - Instal	lation Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	IONUMEN [®]	TS.						
GOVERN	MENT ISSUED MARKERS	S - ALL TYI	PES\$2	<u>50.00</u>						
FLUSH SI	ETTING OF GRANITE & E	RONZE O	N GRANIT	E (NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BR	ONZE ON	CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SID	ES THAN MONUMENT BAS	SE.					
ADD 4" T0	O LENGTH AND WIDTH (OF BASE T	O DETERI	MINE FOUNDATION SIZE N	NEEDED.					
ADD \$50.	00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
CORNER	MARKERS (SET OF 4)	\$125.00								
VASE ON	LY	\$100.00	(ADD \$50	0.00 FOR ALL FEES FOR B	UILT IN VASE)					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CRE	MATION BURIALS PER GR	AVE: 2					
(C	ALL MIKE @ HURON CEN	METERY M	IAINTENA	NCE FIRST)						
Installatio	on Fee Pavable to:	CASH. CI	HECK		Spring delivery begin	ns (date):				

HURON CEMETERY MAINTENANCE <u>CC VIA PHONE</u>
P.O. BOX 112
HIGHLAND, MI 48357

Spring delivery begins (date):	
WEATHER PERMITTING	
Fall/Winter Delivery "cutoff" (date):	
WEATHER PERMITTING	

REDFORD CEMETERY (OLD BELL/BRANCH)

Address	TELEGRAPH - BETWEEN	5 & 6 MILE	RD.			Form Required: FOR	<u>RM</u>	Yes	X	No	
City	REDFORD	State	MI	Zip		Grave Location Requir	ed on Memorial:	Yes		No	Х
Phone						Symbol Required on M	lemorial:	Yes		No	Х
Fax						If yes, what symbol?				1	
Email						Benches Permitted:	Call contact	Yes		No	Х
Contact	REGINA GILBERT	Phon	e (313)	549-0561		Borders Required on F	oundation:	Yes		No	Х
											1
				Rules & Regulation	s - Installation	Fee					
PREFER	FLUSH FLAT MARKER										
INCH ME	MORIALS TO DO FOUNI	DATIONS									
Notes:											
Installatio	on Fee Payable to:					Spring delivery begin	s (date):				
INCH ME	MORIALS					WEATHER PERMITTI	NG				
580 S. MA	AIN ST.					Fall/Winter Delivery "	cutoff" (date):				
NORTHV	ILLE, MI 48167					WEATHER PERMITTI	NG				

RESURRECTION

Address	18201 CLINTON RIVER F	ROAD				Form Required: FORM	Yes	Χ	No	
City	CLINTON TWP.	State	MI	Zip	48038	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 286-9020					Symbol Required on Memorial:	Yes		No	Х
Fax	(586) 286-2441					If yes, what symbol?				
Email	lachatz@mtelliott.com					Benches Permitted: Designated areas	Yes	Х	No	
Contact	LYNN ACHATZ	Phone	(586) 286-	9020		Borders Required on Foundation:	Yes		No	Χ

Rules & Regulations - Installation Fee

FLUSH GRANITE ONLY. 8, 10 or 12 MONUMENT LOTS - 2 GRAVE MONUMENT LOTS IN DESIGNATED SECTIONS. NOT REQUIRED TO HAVE CROSS ON MARKER. NO GOLD LITHOCHROME ONLY BLACK, WHITE, OR GRAY. PHOTOS ETCHED ON GRANITE ONLY. MUST HAVE SIGNED CEMETERY CONSENT CARD.

FOUNDATION FEE:

24"x 12"x 4"- \$350.00

16"x 8"x 4" (BABY MARKER) - \$350.00 Section 2A or 2B only

MONUMENTS - \$600.00

BENCHES,- CALL CEMETERY FOR FEE

CREMATION MEMORIALS - \$0.00

Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2

Installation Fee Payable to: CASH CHECKS ONLY

RESURRECTION CEMETERY
(SAME ADDRESS AS ABOVE)

Spring delivery begins (date): APRIL 1ST

Fall/Winter Delivery "cutoff" (date): NOV. 30TH

FROM DEC 1 THRU MAR 31, PLEASE CONTACT TIM BURROWS @

586-246-9735 FOR DELIVERY APPROVAL

<u>RICHMOND</u>

Address	M-19, N OF 33 MILE RD.					Form Required:	Yes	Nc	X
City	RICHMOND	State	MI	Zip	48062	Grave Location Required on Memorial:	Yes	No	X
Phone Fax	(586) 727-7571 X 201 (586) 727-2489					Symbol Required on Memorial:	Yes	Nc	Χ
Email	dfield@cityofrichmond.net					If yes, what symbol?			
Eman	•	<u>-</u>				Benches Permitted:	Yes	NC NC	
Contact	DAWN FIELD	Phone	(586) 727-	-7571		Borders Required on Foundation:	Yes	Nc	X
	TION FEE: - ER CUBIC FOOT.		Ru	les & Regulatio	ons - Installation	Fee			
Pet Ceme \$75.00	tery Foundation Fee:								
Notes: W	/ITH A CASKET BURIAL, 2	CREMAIN	NS ARE ALI	LOWED - (1 AT	THE HEAD AND 1	AT THE FOOT)			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
	RICHMOND					APRIL 15TH			
36725 Div						Fall/Winter Delivery "cutoff" (date):			
	ND, MI 48062					OCTOBER 15TH			

RIVER REST

(SAME ADDRESS AS ABOVE)

		/= . = = = = = =					E		.,		
	G-4413 FLUSHING ROAD			·			Form Required: FORM	Yes	X	No	
City	FLINT	State	MI	Zip	48504		Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 732-0260						Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 732-0260						If yes, what symbol?			1	
Email	sha@sunsethills.com						Benches Permitted:	Yes		No	Х
Contact	DEBE McCORD	Phone	(810) 73	32-0260			Borders Required on Foundation:	Yes		No	Χ
			F	Rules & Reg	julations - Ins	tallation	Fee				
FLUSH G	RANITE AND BRONZE. I	MONUMEN	TS ALLO	WED IN SE	CTIONS A-C-1	1-3-5, 1-R	, 2-R & 3-R AND MUST				
BE 5 GRA	AVE LOTS. CALL CEMET	ERY FOR	SPECIFIC	INFORMAT	TION ON MON	NUMENTS	S. NO CAMEOS				
ALLOWE	D. JET BLACK WITH LAS	SER PHOTO	ONLY.								
BASE MI	NIMUM 3'6"x 1'2"	BASE MA	XIMUM 6	6'4"x 1'6"							
DIE MINI	MUM 2'6"x 2'	DIE MAX	IMUM 5'x	2'8"							
FOUNDA	TION FEE: .50 PSI										
16"x 8" G	RANITE OR BRONZE \$12	20.00 (INFA	NT)								
24"x 12" (GRANITE or Bronze - \$272	2.00									
24"x 13" (OR 14" BRONZE - \$272.00) (WITH OF	R WITHO	UT VASE)							
54" x 12"	GRANITE - \$420.00 (COM	PANION, (ONLY SIZ	E ALLOWE	D)						
44"x 13" (OR 14" BRONZE - \$420.00) (COMPAN	IION, WI	TH OR W/O	VASE)						
		•			•						
Notes: #	OF FULL BURIALS PER GR	AVE: 1#0	F CREMAI	NS PER GRA	AVE: 2 OR 1 FUI	LL AND C	REMATION PER GRAVE				
Installatio	on Fee Payable to:						Spring delivery begins (date):				
SUNSET	HILLS CEMETERY						APRIL 15TH (MONDAY THRU FRIDAY	ONLY	')		

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST

RIVERSIDE - CLINTON

Address						Form Required:	Yes		No	Х
City		State	MI	Zip	48104	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 274-7422			•		Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?			•	
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Х	No	
Contact	BRAD BOUCHIE	Phone	(734) 274	-7422		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulat	ions - Installation	Fee				
BRONZE	FLUSH GRANITE, SLAN	ΓS, BEVEL	S, AND MC	NUMENTS						
FOUNDA	TION FEE:									
.65 PSI, N	MINIMUM \$200.00									
ALL BASE	ES FOR MONUMENTS MU	JST BE NO	LONGER	THAN 34" ON	A SINGLE GRAVI	≣				
**ALL MA	RKERS ARE SUBJECT TO	THE APF	PROVAL OF	R DENIAL OF	THE CEMETERY	BOARD.				
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	CREMAIN	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to: <u>CASH</u>	CHECKS	ONLY			Spring delivery begins (date):				
BRAD BC	UCHIE					WEATHER PERMITTING				
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	, MI 49236					OCTOBER 1ST				

RIVERSIDE - PLYMOUTH

1231 GOLDSMITH

PLYMOUTH, MI 48170

Address	680 PLYMOUTH ROAD					Form Required:	Yes	No	Χ
City	PLYMOUTH	State	MI	Zip	48170	Grave Location Required on Memorial:	Yes	No	Χ
Phone	(734) 453-7737					Symbol Required on Memorial:	Yes	No	Χ
Fax	(734) 455-1666					If yes, what symbol?			
Email	DMS@PLYMOUTHMI.GC	<u> VC</u>				Benches Permitted: Prior approval first	Yes X	No	
Contact	CITY OF PLYMOUTH STEVE	Phone	(734) 453	-7737		Borders Required on Foundation:	Yes	No	Х
			Ru	ıles & Regulati	ions - Installation	Fee			
вьоск к	AND BLOCK O: FLUSH C	ONLY UP T	O 36"x 18"	- \$175.00. LA	RGER THAN 36"x	c 18" - \$225.00			
BEVELS,	SLANTS AND MONUMEN	TS IN OTH	IER SECTI	ONS.					
BLOCK M	: COMPANION SLANTS 3	36"x 10"x 1	6"/BASE 46	6"x 14"x 6" <u>ONI</u>	<u>LY</u> (VA'S MUST B	E BRONZE AND			
WILL BE	ATTACHED TO THE BACK	OF THE	SLANT OR	AT FOOT).					
NON-COM	MPANION SLANT: 24"x 10)"x 16" ON	A 32"x 14":	x 6" BASE					
FOUNDA [*]	TION FEE:								
16"x 8" AN	D 20"x 10" ON A 24"x 12" BA	SE - \$200.0	0			VETERAN FLAT BRONZE ON FOUNDATION	NC		
24"x 10" Al	ND 24"x 12" ON A 28"x 16" BA	ASE - \$215.	00			INSTALLATION - 28"x 16" - \$215.00. VETE	RAN'S GRA	NITE	
32"x 12" Al	ND 32"x 14" ON A 40"x 16" BA	ASE - \$235.	00			FLUSH W/O FOUNDATION - \$175.00. SE	E ABOVE FO)R	
36"x 10" Al	ND 36"x 12" ON A 42"x 18" BA	ASE - \$235.	00			BLOCK K AND BLOCK O. BASE SIZE LAI	RGER THAN	I	
42"x 10" Al	ND 42"x 12" ON A 52"x 18" BA	ASE - \$275.	00			58"x 18" & ABOVE, CALL CEMETERY. DE	TERMINED	BY	
46"x 12" A i	ND 46"x 14" ON A 52"x 18" BA	ASE - \$275.	00			OVERALL SIZE.			
52"x 12" A i	ND A 52"x 14" ON A 58"x 18"	BASE - \$30	0.00			(USE 2 FOUNDATIONS AND PLACE SIDE	BY SIDE)		
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	IS PER GRAVE:	4 OR 1 FULL AND	2 CREMAINS PER GRAVE			
Installatio	on Fee Payable to:	CASH, CH	<u>IECK</u>			Spring delivery begins (date):			
CITY OF I	PLYMOUTH					WEATHER PERMITTING			

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

ROMEO

									_	
Address	340 W. ST. CLAIR					Form Required: FORM	Yes	Х	No	
City	ROMEO	State	MI	Zip	48065	Grave Location Required on Memorial:	Yes	Х	No	
Phone	(586) 752-3565					Symbol Required on Memorial:	Yes		No	Х
Contact	KATHRYN TRAPP	Phone	(586) 752-	-3565 Ext 2		If yes, what symbol?			_	
	CLERK					Benches Permitted: Prior approval	Yes	Х	No	
Email	ktrapp@villageofromeo.o	<u>rg</u>				Borders Required on Foundation:	Yes	Х	No	
	https://www.villageofrome	o.org/depa	rtments/ron	neo-village-cen	<u>netary/</u>	2" border on all si	des			
			Ru	les & Regulati	ions - Installatior	n Fee				
FOUNDA	TION FEE:									
24"x 10" -	\$200.00	40"x 18" -	\$450.00			60"x 14" - \$475.00				
24"x 12" -	\$225.00	48"x 10" -	\$300.00			60"x 18" - \$525.00				
24"x 14" -	\$240.00	48"x 12" -	\$350.00			66"x 10" - \$400.00				
24"x 18" -	\$275.00	48"x 14" -	\$400.00			66"x 12" - \$450.00				
36"x 10" -	\$250.00	48"x 18" -	\$475.00			66"x 14" - \$500.00				
36"x 12" -	\$275.00	54"x 10" -	\$350.00			66"x 18" - \$550.00				
36"x 14" -	\$325.00	54"x 12" -	\$375.00			72"x 10" - \$425.00				
36"x 18" -	\$375.00	54"x 14" -	\$450.00			72"x 12" - \$475.00				
40"x 10" -	\$275.00	54"x 18" -	\$500.00			72"x 14" - \$525.00				
40"x 12" -	\$325.00	60"x 10" -	\$375.00			72"x 18" - \$575.00				
40"x 14" -	\$350.00	60"x 12" -	\$425.00							
Foundati	on poured twice a year, v	veather pe	rmitting, by	y Memorial Da	ny and by Veterar	ns Day				
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREI	MAINS PER G	RAVE: 4					

Installation Fee Payable to:	CASH, CHECK	
VILLAGE OF ROMEO		
121 W. ST. CLAIR		
ROMEO, MI 48065		

Spring delivery begins (date):	
VEATHER PERMITTING (USUALLY END OF APRIL)	
Fall/Winter Delivery "cutoff" (date):	
OCTOBER 1ST	

ROMULUS

Address	SHOOK RD.				<u>F</u>	orm Required: FORM	Yes	X	No	
City	ROMULUS	State	MI	Zip	G	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 942-7540				S	Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 942-7592					If yes, what symbol?				
Email	ebragg@romulusgov.com	•			В	Benches Permitted:	Yes	Х	No	
Contact	ELLEN BRAGG ROMULUS CITY HALL	Phone	(734) 942	-7540	В	Borders Required on Foundation:	Yes	Χ	No	
			Ru	les & Regulations - In	stallation F	ee				
FLUSH, B	EVELS, SLANTS AND MO	NUMENTS	3 .							
CITY WIL	L STAKE THE GRAVE AT	NO CHAR	GE. (ORIG	INAL CEMETERY FOR	RM TO SEAI	N MULLINS - smullins@romulusgov	.com).			
INCH ME	MORIALS TO INSTALL FO	UNDATIO	NS FOR FL	USH ONLY. ALL OTH	HER MONUN	MENT FOUNDATIONS				
TO BE INSTALLED BY RICK RUTHERFORD.										
\$85.00 PE	\$85.00 PER LINEAR FOOT ROUND UP TO NEXT 6" OR 1/2 FT CALL RICK RUTHERFORD FOR MONUMENTS									
24x10x16	- \$250.00									
MINIMUM	FEE \$200.00 FOR FOUNI	DATION								
Check an	d copy of cemetery form	signed by	family to:							
RICK RU	THERFORD - (734) 658-52	43 - CHEC	K ONLY a	nd COPY OF FORM!						
38455 Wa	abash									
ROMULU	S, MI 48174									
Notes: BE	NCHES ARE PERMITTED, H	IOWEVER 7	THEY MUST	BE PLACED AT THE HE	EAD, AND MU	IST MEET THE 45" PER				
SINGL	E GRAVE AND 90" PER DOL	JBLE GRAV	'E UNDER R	OMULUS MEMORIAL CE	EMETERY RU	JLES & REGULATIONS.				
# OF FULL	BURIALS PER GRAVE: 1 #	OF CREMA	INS PER G	RAVE: 4 OR 1 FULL AND	D 2 CREMAIN	IS PER GRAVE				
					_					
Mail Orig	inal Signed Cemetery For	m To:			s	Spring delivery begins (date):				

CITY HALL - CITY CLERK 1111 WAYNE RD. ROMULUS, MI 48174

Spring delivery begins (date):	
MARCH 1ST	
Fall/Winter Delivery "cutoff" (date):	
NOVEMBER 1ST	

ROSE CENTER

									_	
Address	1/2 MI S. OF ROSE CENTER	R, W. SIDE	OF MILFO	ORD RD.		Form Required:	Yes		No	Х
City	ROSE TOWNSHIP	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 735-5050					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 735-9514					If yes, what symbol?		_	7	
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	. ,	95-5166 35-9514		Borders Required on Foundation:	Yes		No	Х
				Rules & Regulati	ions - Installatior	ı Fee				
FLUSH, S	LANTS, BEVELS & MONU	JMENTS								
FOUNDA	TION FEE:									
.50 PSI, \$	150.00 MINIMUM									
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMA	INS PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ROSE TO	WNSHIP					WEATHER PERMITTING				
9080 MAS	SON STREET					Fall/Winter Delivery "cutoff" (date):				
HOLLY, N	11 48442					WEATHER PERMITTING				

ROSELAND PARK

Installation Fee Payable to:

ROSELAND PARK CEMETERY

(SAME AS ADDRESS ABOVE)

CASH, CHECK

Address	29001 N. WOODWARD					Form Required: FORM	Yes	Х	No	
City	BERKLEY	State	MI	Zip	48072	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(248) 541-1154 (248) 268-1507					Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х
Email	chall@roselandparkmi.com	<u>m</u>				Benches Permitted: See note below	 Yes	Х	No	
Contact MMG	CHRIS HALL https://www.roselandparko	Phone cemetery.co	(248) 541 om/cemete		ations	Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulati	ions - Installation	Fee				
FLUSH BI	RONZE AND GRANITE. B	RONZE M	UST HAVE	GRANITE BA	SE. BRONZE VA	SES ALLOWED. ANY COLOR OF GRAN	NITE B	RONZ	E	
BASES A	LLOWED. NO BEVELS OF	R SLANTS	ALLOWED	D. MONUMENT	S ALLOWED IN I	DESIGNATED AREAS.				
GRANITE	COMPANIONS ALLOWER	D .								
	FEES:									
	Flagging Fee:	\$175.00 F	Payable to F	Roseland Park	Cemetery					
	Setting Fee:	\$1.00 PSI	payable to	Inch Memorial	ls					
	Foundation Fee:	\$1.00 PSI	Payable to	Roseland Par	k Cemetery					
ONLY ON	E PERSONS NAME ON A	24X12								
MIN SIZE	FOR ADULT DOUBLE IN	TERMENT	IS 16X24 (2 NAMES PER	MARKER)					
ONLY ST	AINLESS-STEEL CAMEOS	ON FLUS	H MEMOR	RIALS						
MEMORIA	AL REMOVAL FEE: \$95.0	0								
*3' AND 4	BENCHES PERMITTED I	DEPENDIN	G ON SEC	TION. LARGE	ER BENCHES PE	RMITTED IF SPACE				
ALLOWE	D. CALL FIRST. GRANITI	E BASE RE	QUIRED.	1.00 PSI FOR	BENCHES AND I	MONUMENTS				
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				

Spring delivery begins (date):

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 1ST (BUT FLEXIBLE)

MAY 1ST

<u>RUBY</u>

									1	
Address	5385 ABBOTTSFORD R	D.				Form Required	Yes		No	X
City	NORTH STREET	State	MI	Zip	48049	Grave Location Required on Memorial:	Yes	Х	No	
Phone	(810) 985-7258					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 985-3065					If yes, what symbol?			-	
Contact	KATHLEEN TURNER (CLERK	()	Phone	(810) 385-161	6	Benches Permitted:	Yes		No	Х
	DAN JERSTENBERGER (SEX	(TON)	Phone	(810) 531-161	9	Borders Required on Foundation:	Yes	Х	No	
	ERNIE MANOLEAS (SUPERVIS	SOR)	Phone	(810) 941-425	54	2" border required (included in p	rice)			
	CATHY JOWETT (SECRETAR	RY)	Email	cathyj@clydet	ownshipscc.org					
			Ru	les & Regulati	ons - Installatior	n Fee				
FLUSH, E	BEVELS, SLANTS AND MO	ONUMENTS	3.							
FOUNDA	TION FEE:									
.50 PSI, N	 //INIMUM \$120.00 FOR UF	P TO 10" x 2	24"							
24"x 12" -	\$144.00									
Only one	(1) monument, marker, or	memorial sl	nall be perr	nitted per buria	l space "above gr	ade" Any other military				
or such m	arker must be flush or bel	ow grade.	•	·		•				
		J								
IF A HEA	DSTONE SHOWS UP WIT	THOUT A F	OUNDATIO	ON A \$500 FIN	NE WILL BE ISSU	JED!				
Notes: #	OF FULL BURIALS PER GR	AVF:1 #OF	CREMAINS	S PER GRAVE: 4	OR 1 FULL AND 1	CREMAINS PER GRAVE				
			0.12							
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CLYDE T	OWNSHIP 810-385-1	616				WEATHER PERMITTING April 16				
3350 VIN	CENT ROAD					Fall/Winter Delivery "cutoff" (date):				
NORTH S	STREET, MI 48049					WEATHER PERMITTING Nov 15				

RURAL HILL

							_
Address	215 W. MAIN ST.					Form Required: FORM Yes X No	
City	NORTHVILLE	State	MI	Zip	48167	Grave Location Required on Memorial: YesNoX	
Phone	(248) 349-1300					Symbol Required on Memorial: Yes No X	
Fax	(248) 449-9953					If yes, what symbol?	
Email	mholtz@ci.northville.mi.u	<u>s</u>				Benches Permitted: <i>Certain locations</i> Yes X No	
Contact	WENDY GUTOWSKI (C	emetery Re	cords)			Borders Required on Foundation: Yes X No	
	wgutowski@ci.northville.	<u>mi.us</u>				Steven Michaels <u>smichaels@ci.northville.mi.us</u>	
				Rules & Regu	ulations - Insta	llation Fee	
FLUSH, B	BEVELS, SLANTS AND M	ONUMENT	S. 36" N	MAX FOR SING	GLE GRAVE. S	EE SHEET FOR SETTING	
FEES WI	THOUT A FOUNDATION.						
FOUNDA	TION FEE:		SETTI	NG FLUSH MA	ARKERS/NO F	DUNDATION:	
16"x 8" - \$	\$120.00		24"x 12	2" - \$110.00			
20"x 10",	24"x 10", 24"x 12" - \$170.0	00	36"x 12	2" - \$120.00			
30"x 10" c	or 12" - \$200.00		48"x 12	2" - \$130.00			
32"x 12" -	\$200.00				**C	ONTACTS:	
36"x 10" c	or 12" - \$200.00				CE	METERY LINE - 248-305-2702	
42"x 10" c	or 12" - \$250.00				MA	TT HOLTZ (MAIN CONTACT) 734-819-0467	
32"x 12" c	or 14", 38"x 12" or 14" - \$2	00.00			JOI	HN (CELL) - 248-755-8876 <u>jlapenta@ci.northville.mi.us</u>	
46"x 12" c	or 14", 48"x 12" or 14" - \$2	50.00			STI	EVE (CELL) - 248-755-8845	
52"x 12" c	or 14" - \$270.00						
FOR LAR	GER SIZE FOUNDATION	S USE .48	PSI - GO	OVERNMENT	MARKERS - \$1	70.00	
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 4 OR 1 FULL AND 1 CREMA						AND 1 CREMATION PER GRAVE	
Installatio	on Fee Payable to:	CASH, C	HECK			Spring delivery begins (date):	

CITY OF NORTHVILLE - C/O RURAL HILL CEMETERY
215 W. MAIN STREET
NORTHVILLE, MI 48167

Spring delivery begins (date):

WEATHER PERMITTING Foundations installed

Fall/Winter Delivery "cutoff" (date): 5/1-11/15

WEATHER PERMITTING

SACRED HEART

							-		1	$\overline{}$
Address	18720 13 Mile Rd.					Form Required:	Yes		No	Х
City	ROSEVILLE	State	MI	Zip	48066	Grave Location Required on Memorial:	Yes	Χ	No	
Phone	586-777-9116 Ext. 4					Symbol Required on Memorial:	Yes		No	Х
Fax	586-279-1660					If yes, what symbol?			_	
Email	N/A					Benches Permitted:	Yes		No	Χ
Contact	ROXANNE GRONKIEWIO	C Phone	586-777-	9116		Borders Required on Foundation:	Yes		No	Х
			EXT. 4			Effective 11-14-19 add TOLL FEE of	5.00 to	orde	r	
			Rı	ules & Regulati	ions - Installatior	n Fee				
FLUSH M	ARKERS ONLY IN SECTION	ONS J, K, L	AND M.	MAXIMUM SIZI	E FOR COMPANI	ON MARKERS IS				
36" LONG	6. MONUMENTS ALLOWE	ED ON 12 (GRAVE LO	TS. NEED PR	IOR APPROVAL I	FOR UPRIGHTS				
FOUNDA	TION FEES (EFFECTIVE 1	1/1/2021):								
24"x 12" -										
36"x 12" -										
50 X 12	ψο / ο. ο ο									
Notes: #	OF FULL BURIALS PER C	GRAVE: 1	# OF CRE	MAINS PER G	RAVE: 2					
										1
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begins (date): April 7	, 2018			
SACRED	HEART CEMETERY					WEATHER PERMITTING				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):N	ov. 10,	2018		
						WEATHER PERMITTING				

SACRED HEART OF SAINT MARY

Address	17219 MOUND RD.					Form Required:	Yes		No	Χ
City	DETROIT	State	MI	Zip	48212	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(313) 831-6659 (updated of (313) 831-8522	12-2020)				Symbol Required on Memorial: If yes, what symbol?	Yes		No	Х
Email	N/A					Benches Permitted: Call first	 Yes	Х	No	
Contact	DUANE	Phone	(313) 83	31-6659		Borders Required on Foundation:	Yes		No	Х
				Pulos & Poqui	lations - Installati	on Foo				
	DANUTE AND OLANTO			_		on ree				
	RANITE AND SLANTS.	MONUMEN	IS ALLOV	WED IN DESI	GNATED AREAS.					
	TION FEE:									
24"x 12"x	4" - 200.00									
24"x 10"x	16" - \$300.00 (SINGLE S	SLANT)								
24"x 10"x	16" - \$400.00 (SLANT O	N A BASE)								
Notes: #	OF FULL BURIALS PER GR	RAVE: 1 # O	F CREMAI	NS PER GRAV	E: 2 OR 1 FULL AN	D 1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
SACRED	HEART OF SAINT MARY	Y				WEATHER PERMITTING				
4440 RUS	SSELL					Fall/Winter Delivery "cutoff" (date):				
DETROIT	MI 48212					WEATHER PERMITTING				

SACRED HEART OF SAINT MARY GROSSE ILE

Address	21599 PARKE LANE RD.					Form Required: FORM	Yes	Х	No	
City	GROSSE ILE	State	MI	Zip	48138	Grave Location Required on Memorial:			No	
Phone				•		Symbol Required on Memorial:	Yes		No	
Fax						If yes, what symbol?			•	
Email						Benches Permitted: Call first	Yes		No	
Contact	RICHARD	Phone	(734) 676	-1378		Borders Required on Foundation:	Yes		No	
		Fax	(734) 676			·	'			,
			Ru	iles & Regulat	ions - Installation	Fee				
24"x 12"x	4" - ONLY 36" GRAVES									
INCH TO	SUPPLY FOUNDATIONS									
	EN 9 AM - 1 PM									
Natas										
Notes:										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
INCH ME	MORIALS									
580 S. MA	AIN ST.					Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167									

SALEM WALKER

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

Address	ANGEL RD. OFF 6 MILE					Form Required:		Yes		No	Х
City	PLYMOUTH	State	MI	Zip	48170	Grave Location Required on I	Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on Memoria	al:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?					
Email						Benches Permitted:		Yes	Х	No	
Contact	MIKE WILLENBERG @		(248) 887	'-6700		Borders Required on Founda	tion:	Yes		No	Χ
НСМ	HURON CEMETERY MAI	NTENANC	E			2" border on a	all sides				
			Ru	ıles & Regula	tions - Installatio	ı Fee				_	
BRONZE,	FLUSH GRANITE, SLANT	S, AND M	ONUMENT	ΓS.			For Grav		ations		
GOVERN	MENT ISSUED MARKERS	- ALL TYF	PES\$25	<u>50.00</u>				ONE 37-03	04		
FLUSH SI	ETTING OF GRANITE & B	RONZE OI	N GRANIT	E (NO FOUND	PATION)		240-4	37-03			
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA ⁻	TION FEE FOR MONUMEI	NTS & BRO	ONZE ON	CONCRETE (N	NON VA)		INCH M	EMOF 0 DO	RIALS]	
\$0.70 PSI	OF FOUNDATION, MINIM	IUM \$250.0	00				FOUND				
ALL FOU	NDATIONS MUST BE 2" LA	ARGER O	N ALL SIDE	ES THAN MON	NUMENT BASE.		IVII	KE VV.]	
ADD 4" TO	O LENGTH AND WIDTH O	F BASE T	O DETERN	AINE FOUNDA	ATION SIZE NEED	ED.					
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	-\$125.00									
VASE ON	LY	\$100.00	(ADD \$50	.00 FOR ALL F	FEES FOR BUILT	IN VASE)					
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CRE	MATION BURI	IALS PER GRAVE	: 2-4					
(C	ALL MIKE @ HURON CEM	IETERY M	AINTENAI	NCE FIRST)							
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begins (date	e):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

SALINE TOWNSHIP CEMETERIES

Address						Form Required:	Yes		No	Х
City	SALINE	State	MI	Zip	48176	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 274-7422					Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A					If yes, what symbol?				
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Χ	No	
Contact	BRAD BOUCHIE	Phone	(734) 274-	7422		Borders Required on Foundation:	Yes		No	Χ
_										
			Rul	es & Regulati	ons - Installation	Fee				
BRONZE	, FLUSH GRANITE, SLANT	ΓS, BEVEL	S, AND MO	NUMENTS						
FOUNDA	TION FEE:									
.65 PSI, N	//INIMUM \$200.00									
ALL BASI	ES FOR MONUMENTS MU	JST BE NO	LONGER 7	THAN 34" ON	A SINGLE GRAVE	•				
**ALL MA	RKERS ARE SUBJECT TO	THE APP	ROVAL OF	R DENIAL OF T	THE CEMETERY I	BOARD.				
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 2	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to: <u>CASH</u>	CHECKS (ONLY			Spring delivery begins (date):				
BRAD BC	OUCHIE					WEATHER PERMITTING				
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	, MI 49236					OCTOBER 1ST				

SEYMOUR LAKE

Address	SASHABAW & SEYMOU	R LAKE RI	D .			Form Required:	Yes		No	Х
City	ORTONVILLE	State	MI	Zip	48462	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 627-2851					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 627-6208					If yes, what symbol?				
Email	rblair@brandontownship.	<u>com</u>				Benches Permitted: Prior approval	Yes	Х	No	
Contact		Phone	(248) 627-	2851		Borders Required on Foundation:	Yes	Х	No	
	TOWNSHIP CLERK					2" border required				
			Ru	les & Regulat	ions - Installatior	n Fee				
FLUSH, S	SLANTS, BEVELS, AND M	ONUMEN	ΓS.							
FOUNDA	TION FEE:									
.50 PSI, \$	150.00 MINIMUM - PRICIN	NG IS OFF	THE BASE	SIZE OF MAR	RKER					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAINS	PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE				
										-
Installatio	on Fee Payable to:					Spring delivery begins (date):				
GENESE	E VALLEY VAULT	(810) 695	5-5166			WEATHER PERMITTING				
10510 N.	HOLLY ROAD					Fall/Winter Delivery "cutoff" (date):				
HOLLY, N	/II 48442-9323					WEATHER PERMITTING				

SHELDON CEMETERY

Address						Form Required: FORM	Yes	X	No	
City	CANTON	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	
Phone						Symbol Required on Memorial:	Yes		No	
Fax						If yes, what symbol?				
Email						Benches Permitted: Prior approval	Yes		No	
Contact	GARY PYLE	Phone	(734) 394	4-5292		Borders Required on Foundation:	Yes		No	
										-
			R	ules & Regulations - Ins	stallation	Fee				
INCH ME	MORIALS TO DO FOUND	ATION								
Notes:										
Installation	on Fee Payable to:					Spring delivery begins (date):				
	MORIALS									
580 S. M						Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167									

SMITH

P.O. BOX 112

HIGHLAND, MI 48357

										_	
Address	FENTON ROAD NEAR R	EAD ROAI	D			Form Required:		Yes		No	Х
City	HARTLAND	State	MI	Zip		Grave Location Require	d on Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on Me	emorial:	Yes		No	Х
Fax	(248) 887-4487					If yes, what symbol? _				_	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @	Phone	e (248) 887-	6700		Borders Required on Fo	oundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANO	CE			2" borde	er on all sides				
			Ru	les & Regulations - In	nstallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	ΓS, AND M	IONUMENT	S - 36" MAX PER GRA	AVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	0.00							
FLUSH S	SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)										
\$0.50 PSI	PSI, MINIMUM \$175.00										
FOUNDA [*]	TION FEE FOR MONUME	NTS & BR	ONZE ON C	ONCRETE (NON VA)	<u>.</u>						
\$0.70 PSI	OF FOUNDATION, MINIM	1UM \$250.	00								
ALL FOUI	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT	BASE.						
ADD 4" T	O LENGTH AND WIDTH C	F BASE T	O DETERM	INE FOUNDATION SI	ZE NEEDE	ED.					
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FO	R BUILT II	N VASE)					
Notes: #	s: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2-3										
(C	ALL MIKE @ HURON CEN	METERY M	<u>IAINTENAN</u>	CE FIRST)							
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begins	s (date):				
HURON C	RON CEMETERY MAINTENANCE CC VIA PHONE WEATHER PERMITTING										

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

<u>SOOP</u>

Address	49250 DENTON ROAD					Form Required:	Yes	No	Χ			
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes	No	Х			
Phone	(734) 699-8900 ext 6					Symbol Required on Memorial:	Yes	No	Х			
Fax	(734) 699-5213					If yes, what symbol?		_				
Email	bbeaudry@vanburen-mi.c	org				Benches Permitted:	Yes	No	Χ			
Contact	BRITTANY BEAUDRY	Phone	(734) 699-	8909		Borders Required on Foundation:	Yes	No	Χ			
									1			
			Rul	es & Regulat	ions - Installation	Fee						
CHARTE	R TOWNSHIP OF VAN BU	IREN, KIRK	K, CHUCK C	OR SAM, TO S	TAKE GRAVE. TH	HE FAMILY IS						
RESPON	SIBLE FOR FOUNDATION	I/INSTALLA	ATION. NO	SUNDAY OR	HOLIDAY BURIAL	.S.						
INCH TO	INSTALL FOUNDATIONS	: \$1.00 PSI										
FOUNDA [*]	TION FEE: \$50.00 (MARK	ING AND I	NSPECTIO	N)								
х												
.												
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE						
In atallet!	an Eag Dayahla tay Chash	o Only				Coming delivery begins (detc):						
	on Fee Payable to: Check	-				Spring delivery begins (date):						
	R TOWNSHIP OF VAN BU	IKEN				APRIL 1ST						
	LER ROAD					Fall/Winter Delivery "cutoff" (date):						
RETTEAIT	LE, MI 48111					NOVEMBER 30TH						

SOUTH LYON

SOUTH LYON, MI 48178

Address	WEST LAKE RD. OFF 1	0 MILE				Form Required: FORM	Yes	X	No			
City	SOUTH LYON	State	MI	Zip	48178	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(248) 437-1735					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(248) 486-7054					If yes, what symbol?			-			
Email						Benches Permitted:	Yes	Х	No			
Contact	JUDY	Phone	(248) 43	7-1735		Borders Required on Foundation:	Yes	Х	No			
	INCH MEMORIALS TO	VERIFY SI	DES			2" or 3" border required						
Rules & Regulations - Installation Fee												
FLUSH, BEVELS, SLANTS AND MONUMENTS. ALL STONES MUST BE PLACED AT HEAD OF GRAVE												
FACING V	WEST SO NAMES CAN E	BE READ F	ROM FRO	NT OF CEMETE	ERY. SECTION 8	HAS FOOTSTONE						
AND HEA	DSTONE GRAVES.											
24"x 12"x	4" MUST BE ROCK SID	ES										
ONLY 1 A	BOVE GROUND MARKE	R PER GR	AVE. SEC	OND MARKER	WILL BE SET FL	USH. MONUMENT						
FOUNDA ⁻	TION PERMIT REQUIRE	D.										
FOUNDA ⁻	TION FEE: BASED ON S	SIZE (2" AR	AM DNUC	RKER) UP TO 2	26"x 16" - \$85.00.							
GOVERN	MENT MARKERS - \$95.0	00										
UP TO 44	"x 20" - \$120.00											
UP TO 54	"x 20" - \$135.00											
UP TO 60"x 23" - \$150.00												
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 4												
Installatio	on Fee Payable to:	CASH, CI	HECK ON	LY		Spring delivery begins (date):						
CITY OF	SOUTH LYON					WEATHER PERMITTING						
335 S. W	ARREN					Fall/Winter Delivery "cutoff" (date):						

WEATHER PERMITTING

<u>SOUTHFIELD</u>

Address	26000 EVERGREEN					Form Required:	Yes	No	Х
City	SOUTHFIELD	State	MI	Zip	48076	Grave Location Required on Memorial:	Yes	No	Х
Phone	(248) 796-4630					Symbol Required on Memorial:	Yes	No	Χ
Fax	(248) 796-4635					If yes, what symbol?	<u> </u>		
Email	N/A					Benches Permitted:	Yes	No	Х
	SHAVELLA WILLIAMS JOHN THOMPSON (PAR	Phone < SVCS DE	(248) 796- EPT.) or (24			Borders Required on Foundation:	Yes	No	Х
			Ru	les & Regulati	ions - Installation	Fee			
FOUNDA ⁻	TIONS WILL NOT BE POU	JRED WITH	HOUT SPE	CIFIC INSTRU	CTIONS FROM F	AMILY.			
FOUNDA [*]	TION FEE: (SUBJECT TO	CHANGE)						
24"x 12" -	\$125.00								
UP TO 30	" - \$150.00								
UP TO 48	" - \$175.00								
UP TO 60	" - \$200.00								
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CRE	MAINS PER G	RAVE: 4				
Installatio	on Fee Payable to:	Cash & Ch	<u>necks</u>			Spring delivery begins (date):			
CITY OF	SOUTHFIELD					WEATHER PERMITTING			
26000 EV	ERGREEN					Fall/Winter Delivery "cutoff" (date):			
SOUTHFI	ELD, MI 48076					WEATHER PERMITTING			

SQUARE LAKE

						r				
Address	JOSLYN RD., 1/4 MILE NO	ORTH OF CL	ARKSTON R	RD.	Form Required:	Yes	No	Х		
City	ORION TOWNSHIP	State	MI	Zip	Grave Location Required on Memorial:	Yes	No	Х		
Phone	(248) 396-5266				Symbol Required on Memorial:	Yes	No	Χ		
Fax	N/A				If yes, what symbol?					
Email	squarelakecemetery@gr	nail.com			Benches Permitted:	Yes	No	Х		
Contact	CINDY SARTORI	Phone	(248) 396-	-5266	Borders Required on Foundation:	Yes	No	Х		
S	EXTON BRAD SCHICK		(810) 691-	-7086						
			Ru	les & Regulations - Installation	Fee					
BRONZE	, FLUSH, BEVELS, SLAN	TS AND MC	NUMENTS).						
FOUNDA	TION FEE: .50 PSI									
CALL CII	NDY FIRST FOR MONUM	ENT REGU	ILATIONS/F	RESTRICTIONS TALLER THAN	38".					
ALL DESIGNS MUST HAVE PRIOR APPROVAL.										
FOUNDA	TIONS ARE POURED (W	EATHER P	ERMITTING	G) APRIL THRU OCTOBER. DE	LIVERY OF MEMORIAL					
ONLY IF	FOUNDATION IS IN PLAC	CE.								
MUST CA	ALL CINDY BEFORE DELI	VERY.								
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE										
Installati	on Fee Payable to:				Spring delivery begins (date):					
SQUARE LAKE CEMETERY ASSOCIATION					YEAR ROUND - WEATHER PERMITT	ING				
742 BOS	742 BOSCO DR. Fall/Winter Delivery "cutoff" (date):									
LAKE OR	ION, MI 48362				YEAR ROUND - WEATHER PERMITT	ING				

ST. CLEMENT

CENTER LINE, MI 48015

										_	
Address	8325 ENGLEMAN						Form Required:	Yes		No	Х
City	CENTER LINE	State	MI	Zip	48015		Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 757-3306						Symbol Required on Memorial:	Yes	Χ	No	
Fax	(586) 757-5390						If yes, what symbol? Religious			-	
Email							Benches Permitted:	Yes		No	Х
Contact Email	TERESA RORICK stclementcemetery@gr	Phone mail.com	(586) 75 EXT. 302				Borders Required on Foundation:	Yes		No	X
			R	ules & Re	gulations - In	stallation	Fee				
FLUSH G	RANITE ONLY WITH PI	ENCIL ROUNI	D EDGES	6, 4" THICK	<.						
MAXIMUN	M SIZE OF SINGLE MAF	RKER IS 24"x	12". MAX	XIMUM SIZ	ZE OF DOUBL	E MARKE	R IS 36"x 12".				
BRONZE	MARKERS (INCLUDIN	G VA) ARE RI	EQUIRED	ТО ВЕ М	IOUNTED ON	GRANITE	OR CEMENT.				
BENCHES	S, UPRIGHT MONUMEN	NTS AND UPF	RIGHT SL	ANTS NO	LONGER PER	RMITTED					
FOUNDA [*]	TION FEE:										
GRANI	<u>TE</u>			BRONZ	<u>:E</u>						
24"x 12	" - \$325.00			24"x 12'	" - \$600.00						
36"x 12	:" - \$500.00 (TWO SETT	TNGS)		36"x 12'	" - \$800.00						
INFANT A	AND STONE SETTINGS	- PLEASE CA	\LL								
CALL TER	RESA RORICK FOR GR	AVE #, ETC.,	OR EMA	IL stcleme	ntcemetery@g	gmail.com					
Notes: # 0	OF FULL BURIALS PER G	RAVE: 1 # OF	CREMAIN	NS PER GR	AVE: 2 OR 1 FU	ULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:	NEW MAILING					Spring delivery begins (date):				
ST. CLEMENT CEMETERY ST. CLEMENT CEMETERY OR EARLY MAY 2021					APRIL 1ST						
8075 RITTER						Fall/Winter Delivery "cutoff" (date):					

NOVEMBER 1ST

ST. GEORGE LUTHERAN

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

								-				
Address	HERBST RD.				Form Required:		Yes		No	Χ		
City	BRIGHTON	State	MI	Zip	Grave Location Requir	ed on Memorial:	Yes		No	Χ		
Phone	(248) 887-6700				Symbol Required on Memorial: Yes				No	Χ		
Fax	(248) 887-4487				If yes, what symbol?				_			
Email					Benches Permitted:	Call contact	Yes		No			
Contact	MIKE WILLENBERG @	Phone	(248) 887-	6700	Borders Required on F	oundation:	Yes	Х	No			
HCM	HURON CEMETERY MAI	NTENANC	E		2" boro	2" border on all sides						
			Rul	es & Regulations - Ins	tallation Fee							
BRONZE,	FLUSH GRANITE, SLANT	S, AND M	ONUMENT	S - 36" MAX PER GRAV	/E							
GOVERN	MENT ISSUED MARKERS	- ALL TYF	PES\$250	<u>0.00</u>								
FLUSH SI	ETTING OF GRANITE & B	RONZE OI	N GRANITE	(NO FOUNDATION)								
\$0.50 PSI	, MINIMUM \$175.00											
FOUNDA ⁻	TION FEE FOR MONUME!	NTS & BRO	ONZE ON C	ONCRETE (NON VA)								
\$0.70 PSI	OF FOUNDATION, MINIM	IUM \$250.0	00									
ALL FOU	NDATIONS MUST BE 2" LA	ARGER OF	N ALL SIDE	S THAN MONUMENT B	BASE.							
ADD 4" T0	O LENGTH AND WIDTH O	F BASE TO	O DETERM	INE FOUNDATION SIZE	E NEEDED.							
ADD \$50.	00 FOR BUILT IN VASE											
MISCELL	ANEOUS ITEMS											
CORNER	MARKERS (SET OF 4)	-\$125.00										
VASE ON	LY	\$100.00	(ADD \$50.0	00 FOR ALL FEES FOR	BUILT IN VASE)							
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CREM	MATION BURIALS PER	GRAVE: 2-4							
(C	ALL MIKE @ HURON CEN	IETERY M	AINTENAN	CE FIRST)								
		_										
Installatio	on Fee Payable to:	CASH.	CHECK		Spring delivery begin	ns (date):						

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

ST. HEDWIG

Address	23755 MILITARY ROAD					Form Required: FORM		Yes	Χ	No	
City	DEARBORN HGTS	State	MI	Zip	48127	Grave Location Required on	Memorial:	Yes	Χ	No	
Phone	(313) 562-1900					Symbol Required on Memor	ial:	Yes	Χ	No	
Fax	(313) 562-8238					If yes, what symbol?	Cross				
Email	shc@sthedwigcemetery.c	<u>om</u>				Benches Permitted:		Yes		No	Х
Contact	Brian D. Jonca	Phone	(313) 562-	1900		Borders Required on Founda	ation:	Yes		No	Χ

Rules & Regulations - Installation Fee

SINGLE FLUSH 24" x 12" x 4" GRANITE, SAWED SIDES MARKERS ONLY. MONUMENTS AND SLANTS IN OLD SECTION. LASER PHOTOS AND INSET CAMEOS ARE ALLOWED WITH THE PROPER DISCLAIMER FORM SIGNED BY THE FAMILY AND PROVIDED TO THE CEMETERY TO BE KEPT ON FILE. ALL MARKERS MUST HAVE A CHRISTIAN CROSS IN THE DESIGN. THE DESIGN MUST BE APPROVED BY THE CEMETERY BEFORE ORDER PLACEMENT IS TO BE ACCEPTED. ALL MARKERS MUST HAVE THE LOT AND GRAVE NUMBERS "V" CUT 3/4" IN HEIGHT AND A MIN DEPTH OF 3/16" IN THE LOWER RIGHT-HAND CORNER OF THE FACE OF THE STONE.

FOUNDATION FEE:

ALL FLAT MARKERS - \$400.00 2-20-24

GOVERNMENT MARKER 24"x 12" - \$250.00. **RE-SET FEE - \$150.00 UNLESS OLD MARKER IS BURIED**UNDER NEW MARKER - THEN FEE IS \$350.00

*NOTE - ONLY (1) 24"x 12" PER GRAVE - UP TO 3 NAMES ON THE MARKER.

BABY - SECTION J - 16"x 8"x 4" - N/C FOR PLACEMENT AS OF 9/8/2020

Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 3 OR 1 FULL AND 2 CREMAINS PER GRAVE

Installation Fee Payable to:	ALL CREDIT CARDS
ST. HEDWIG CEMETERY	ACCEPTED
(SAME ADDRESS AS ABOVE)	

Spring delivery begins (date):
APRIL 1ST
Fall/Winter Delivery "cutoff" (date):
NOVEMBER 1ST

ST. JOHN'S - SHELBY

						_				
Address	25 MILE ROAD				Form Required:	Yes	No	Х		
City	SHELBY TWP	State	MI	Zip	Grave Location Required on Memorial:	Yes	No	Χ		
Phone	(586) 781-5567				Symbol Required on Memorial:	Yes	No	Χ		
Fax	(586) 781-0672				If yes, what symbol?					
Email	N/A				Benches Permitted:	Yes	No	Х		
Contact	SANDY BURY	Phone	(586) 781	5567	Borders Required on Foundation:	Yes	No	Х		
			Ru	les & Regulations - Installat	ion Fee					
SINGLE N	MARKER NO WIDER THAI	N 3' AND N	IO TALLER	THAN 3' ALLOWED						
DOUBLE	MARKER NO WIDER THA	AN 6' AND	NO TALLEI	R THAN 3' ALLOWED						
CALL FO	R FOUNDATION FEE AND	POSITIO	NS OF MAF	RKERS. ALL MARKERS MUS	ST FACE DRIVEWAY.					
NI-1 "	05 5111 BUDIAL 0 BED 00		4 1 10 1 1 0 0	-0015 00 1447 4 050001 05	D.V.O.I.T. (O.V.I.) FIDOT					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 OR	1 URN, 2 PI	EOPLE OR MAX 1 PERSON PE	R VOLT (CALL FIRST)					
Installatio	on Fee Payable to:				Spring delivery begins (date):		·			
	-	: (586) 784	-5701		WEATHER PERMITTING					
19020 33		(000)			Fall/Winter Delivery "cutoff" (date):					
ARMADA, MI 48005					WEATHER PERMITTING					

ST. JOHNS MEMORIAL GARDENS - FRASER

Address	15685 FOURTEEN MILE	RD				Form Required: Yes No						
City	FRASER	State	MI	Zip	48026	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(810) 329-5937					Symbol Required on Memorial:	Yes		No	Х		
Fax	(810) 329-6540					If yes, what symbol?						
Email	ROSE7933@SBCGLOBA	AL.NET				Benches Permitted:	Yes	Х	No			
Contact	ROSE RATTEE	Phone Cell	(810) 329 (586) 215			Borders Required on Foundation:	Yes		No	Χ		
			Ru	ıles & Regulat	ions - Installation	ı Fee						
GRANITE AND BRONZE ALLOWED. GARDEN OF MEMORY - ALL FLUSH. BRONZE ARE TO BE MOUNTED												
ON GRAN	NITE BASE.											
FOUNDA	TION FEE: .55 PSI											
24"x 12" (SINGLE) - \$158.40											
24"x 16" (DOUBLE) - \$211.20											
12"x 14" (CREMATION) - \$92.40											
BRONZE	DOUBLE - 36"x 12" - \$237	7.60, 44"x 1	4" - \$338.8	0								
IF CEME	TERY POURS CONCRETE	BASE - F	EE IS .75 F	PSI								
Notes: #	OF FULL BURIALS PER G	RAVE: 2 (DEPENDIN	G ON SECTIO	ON). # OF CREMA	INS PER GRAVE: UP TO						
3 DI	EPENDING ON SECTION.	OR 1 FUL	L AND 2 C	REMAINS PE	R GRAVE (CALL I	FOR APPROVAL FIRST).						
Installatio	on Fee Payable to:					Spring delivery begins (date):						
ST. JOHN	IS MEMORIAL GARDENS					APRIL 15TH						
7933 FRE	D W. MOORE HIGHWAY					Fall/Winter Delivery "cutoff" (date):						
CASCO, I	, MI 48064 OCTOBER 30TH											

ST. JOHN - HOWELL / HARTLAND

Phone Symbol Required on Memorial: Yes No Fax If yes, what symbol? Email Benches Permitted: Yes No	Address	1991 N. HACKER RD.					Form Required:	Yes	No
Email Benches Permitted: Yes No Sorders Required on Foundation: Yes No No Sorders Required on Foundation: Yes No No No Sorders Required on Foundation: Yes No	City	HOWELL	State	MI	Zip	48855	Grave Location Required on Memorial:	Yes	No
Email Benches Permitted: Yes No No Contact Phone (517) 546-7200 Borders Required on Foundation: Yes No No 2" border on all sides Rules & Regulations - Installation Fee 35 PSI + 2" ON ALL SIDES Notes: Spring delivery begins (date):	Phone						Symbol Required on Memorial:	Yes	No
Contact Phone (517) 546-7200 Borders Required on Foundation: Yes No 2" border on all sides Rules & Regulations - Installation Fee 35 PSI + 2" ON ALL SIDES Notes: Spring delivery begins (date): ST. JOHN THE BAPTIST CATHOLIC CHURCH	Fax						If yes, what symbol?		
Rules & Regulations - Installation Fee 35 PSI + 2" ON ALL SIDES Notes: St. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH	Email						Benches Permitted:	Yes	No
Notes: Spring delivery begins (date): St. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE B	Contact		Phone	(517) 546-	7200		Borders Required on Foundation:	Yes	No
Notes: Spring delivery begins (date): St. JOHN THE BAPTIST CATHOLIC CHURCH							2" border on all sides		
Notes: Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH				Rul	les & Regulati	ions - Installation	Fee		
Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH	.35 PSI +	2" ON ALL SIDES							
Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH									
Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH									
Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH									
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Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH									
Installation Fee Payable to: ST. JOHN THE BAPTIST CATHOLIC CHURCH ST. JOHN THE BAPTIST CATHOLIC CHURCH									
ST. JOHN THE BAPTIST CATHOLIC CHURCH	Notes:								
ST. JOHN THE BAPTIST CATHOLIC CHURCH	Installatio	on Fee Pavable to:					Spring delivery begins (date):		
		-	C CHURCE	4			opining denivery begins (date).		
2033 N. HAONEN ND.						Fall/Minter Delivery "cutoff" (date)			
HOWELL, MI 48855							an winter benvery cuton (date).		

<u>ST. JOHN'S - YPSILANTI</u>

Address						Form Required:	Yes	No	Х
City		State	MI	Zip		Grave Location Required on Memorial:	Yes	No	Х
Phone				•		Symbol Required on Memorial:	Yes	No	Х
Fax						If yes, what symbol?	<u> </u>		
Email						Benches Permitted:	Yes	No	
Contact	LARRY SANBORN	Phone	(734) 368	3-7949		Borders Required on Foundation:	Yes	No	Х
00111401			(101)000	7.10.10		Doracio reganea en realitación	. 55		
			Rı	ules & Regulations - Ir	nstallation	Fee			
NO LARG	ER THAN 34" ON A SING	I F GRAVE		J					
INO LA INC	ER HIMITOT CITY CITY	LL OIOWL	-						
60 PSI - 9	\$175.00 MINIMUM								
1.001 31 - 1	p173.00 WIII VIII VIII VIII								
Notes:									
					_				
Installatio	on Fee Payable to:					Spring delivery begins (date):			
LARRY S	ANBORN								
3717 CLII	NTON MACON RD.					Fall/Winter Delivery "cutoff" (date):			
CLINTON	, MI 49236								

ST. JOSEPH - LANSING

									1	
Address	2520 W. WILLOW ST.					Form Required:	Yes		No	Х
City	LANSING	State	MI	Zip	48917	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 484-2500					Symbol Required on Memorial:	Yes		No	Х
Fax	(517) 484-2022					If yes, what symbol?			1	
Email						Benches Permitted:	Yes	Х	No	
Contact	BRIAN EPKEY bepkey@dioceseoflansing	Phone p.org	(810) 512-	7010		Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulati	ions - Installation	Fee				
FOUNDA	TION FEES:									
UP TO 32	" - \$450 + TAX									
UP TO 48	s" - \$625 + TAX									
UP TO 52	" - \$725 + TAX									
UP TO 60	" - \$840 + TAX									
OVER 60	- CALL FOR QUOTE									
FLUSH S	FLUSH SINGLE OR COMPANION - \$275									
Notes:										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ST. JOSE	PH CATHOLIC CEMETER	Υ				WEATHER PERMITTING				
2520 W. \	WILLOW ST.					Fall/Winter Delivery "cutoff" (date):				
LANSING	, MI 48917					WEATHER PERMITTING				

ST. JOSEPH - MAYBEE

Address	RAISIN ST.					Form Required:	Yes	No	Χ
City	MAYBEE	State	MI	Zip	48159	Grave Location Required on Memorial:	Yes	No	Χ
Phone						Symbol Required on Memorial:	Yes	No	Х
Fax						If yes, what symbol?			
Email						Benches Permitted:	Yes	No	
Contact	KEVIN	Phone	(734) 735-	1276		Borders Required on Foundation:	Yes	No	
			Rul	les & Regulati	ions - Installation	Fee			
CALL FO	R PRICING								
Notes:									
Installatio	on Fee Payable to:					Spring delivery begins (date):			
						Fall/Winter Delivery "cutoff" (date):			

ST. JOSEPH - MONROE

Address	ddress 909 N. MONROE ST.					Form Required:		Yes		No	Х
City	MONROE	State	MI	Zip	48162	Grave Location Red	quired on Memorial:	Yes		No	Χ
Phone	(734) 241-1411					Symbol Required or	n Memorial:	Yes		No	Χ
Fax						If yes, what symbo	ol?				
Email	standifer.julie@aod.org					Benches Permitted:	must have cemetery approval	Yes	Х	No	
Contact JULIE STANDIFER Phone (734) 241-1411 Heidi Pizzo - pizzo.heidi@aod.org Christine Putz - putz.christine@aod.org		aod.org	Borders Required o		Yes		No	Х			
			Ru	iles & Reg	ulations - Installatior	Fee					
FOUNDA	TION FEE:										
16"x 10"x	4" OR 18"x 10"x 4" - \$300.	00 INFAN	Γ								
FLUSH 24	4"x 12"x 4" - \$475.00										
FLUSH 48	3"x 12"x 4" - \$630.00										
MONUME	NTS - WITH PRIOR APPR	ROVAL AN	D ADDITIO	NAL LOT	UPGRADE FEE:						
BASE 24"	x 12" - \$500.00										
BASE 48"	x 14" - \$1,125.00										
BASE 60"	x 14" - \$1,375.00										
BASE 66"	x 14" - \$1,500.00										
				_							
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CRE	MAINS PE	R GRAVE: 5						
Installatio	on Fee Payable to: <u>S<i>T. JC</i></u>	SEPH CE	<u>METERY</u>			Spring delivery be	gins (date):				
MAIL TO:	ST. JOSEPH CEMETERY	1				APRIL 1ST					
	909 N. MONROE ST.					Fall/Winter Delivery "cutoff" (date):					
	MONROE, MI 48162	NOVEMBER 1ST									

ST. LAWRENCE

Address	5981 AUBURN RD.					Form Required:	Yes	N	10	Х
City	SHELBY TWP	State	MI	Zip	48317	Grave Location Required on Memorial:	Yes	N	10	Χ
Phone	(586) 731-5347					Symbol Required on Memorial:	Yes	N	10	Χ
Fax	(586) 731-3088					If yes, what symbol? Needs approval				
Email	SRANGER@STLAWR	ENCEPARIS	H.COM			Benches Permitted:	Yes	N	10	Χ
Contact	STEVE RANGER	Phone	(586) 73 ext. 257	31-5347 7		Borders Required on Foundation:	Yes	N	10	Χ
			F	Rules & Re	gulations - Installat	ion Fee				
GRANITE	, BRONZE, BEVELS, S	LANTS AND	MONUME	ENTS.						
FOUNDA	TION FEE:									
ALL FLAT	MARKERS - \$300.00									
ALL UPR	GHT MARKERS - \$350	.00								
NO NEW	UPRIGHT MONUMENT	TS OVER 36"	TALL AL	LOWED (ef	fective 1-1-2018					
Notes: # (OF FULL BURIALS PER G	SRAVE: 1 # OI	F CREMAII	NS PER GRA	VE: 2 OR 1 FULL AN	ID 1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ST. LAWI	RENCE CEMETERY					APRIL 15TH				
44633 UT	ICA ROAD					Fall/Winter Delivery "cutoff" (date):				
LITICA M	I 48317					OCTOBER 1ST				

ST. MARYS - MILFORD

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

									•	
Address	SUMMIT STREET				Form Required:		Yes		No	Χ
City	MILFORD	State	MI	Zip	Grave Location Requir	ed on Memorial:	Yes		No	Χ
Phone	(248) 887-6700				Symbol Required on M	lemorial:	Yes		No	Χ
Fax	(248) 887-4487				If yes, what symbol?				-	
Email					Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @	Phone	248) 887	-6700	Borders Required on F	oundation:	Yes	Х	No	
HCM	HURON CEMETERY MA	INTENANC	E		2" boro	der on all sides				
			Rı	iles & Regulations - In	stallation Fee					
BRONZE,	FLUSH GRANITE, SLAN	ΓS, AND M	ONUMENT	S - 30" MAX PER GRA	VE - FLUSH ONLY SEC. A, B, C					
GOVERN	MENT ISSUED MARKERS	3 - ALL TYF	PES\$25	<u>50.00</u>						
FLUSH SE	ETTING OF GRANITE & B	RONZE OI	N GRANITI	E (NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA	TION FEE FOR MONUME	NTS & BRO	ONZE ON	CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MINIM	ИUM \$250.(00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT	BASE.					
ADD 4" TO	O LENGTH AND WIDTH C	F BASE TO	O DETERN	MINE FOUNDATION SIZ	ZE NEEDED.					
ADD \$50.0	00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
CORNER	MARKERS (SET OF 4)	\$125.00								
VASE ON	LY	\$100.00	(ADD \$50	.00 FOR ALL FEES FOI	R BUILT IN VASE)					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREI	MATION BURIALS PER	GRAVE: 2-4					
(C	ALL MIKE @ HURON CEN	ИETERY M	IAINTENAN	NCE FIRST)						
,				,						
Installatio	on Fee Payable to:	CASH, CH	HECK		Spring delivery begir	ns (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

ST. MARY - NEW BALTIMORE

									1	
Address	24 MILE & BASE ST.					Form Required: FORM	Yes	Χ	No	
City	NEW BALTIMORE	State	MI	Zip	48047	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 725-2441					Religious Symbol Suggested on Memorial:	Yes	Х	No	
Fax	(586) 725-3647					If yes, what symbol? Cross			_	
Email	CEMETERY@SMQOC.COM	GBEAUVAIS	@SMQOC.0	COM		Benches Permitted:	Yes		No	Х
Contact	GLORIA BEAUVAIS OR	Phone	(586) 72	25-2441		Borders Required on Foundation:	Yes	Х	No	
KERRY at M	ION. SVCS - MS.UNLIMITED@\	AHOO.COM	1 (586) 453-3	3853 EXT 22	HOME (586) 727-9062	2" border required			_	,
			F	Rules & Re	gulations - Installatior	ı Fee				
CALL CEI	METERY TO VERIFY WHA	AT THE F	AMILY CA	N HAVE						
FOUNDA [*]	TION FEE:									
	NDATIONS - \$0.65/SQ. IN	CH CALC	UI ATFD (ON BASE S	IZF (3-1-24)					
	LE UPRIGHT INSTALL FE		-		(0)					
	ZE HEADSTONE MOUNT	·	5							
V/ DICOI	ZE NEADOTONE MOON	πτο. φτ2ο	,							
CONTAC	T IZEDDY OUUTTUEWOD	THEOD O	LIDDENIT	DDIOEC I	lama (FOC) 707 0000	Call (500) 452 2052				
CONTAC	T KERRY SHUTTLEWOR	IH FOR C	UKKENI	PRICES - I	Home (586) 727-9062	Cell (586) 453-3853				
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # C	OF CREMA	INS PER GR	AVE: 3 OR 1 FULL AND 2	2 CREMAINS PER GRAVE				
	on Fee Payable to and Ma					Spring delivery begins (date):				
	NT SERVICES UNLIMITE	D CAS	H, CHECK	(WEATHER PERMITTING				
37640 30	MILE RD.					Fall/Winter Delivery "cutoff" (date):				
LENOX, N	/II 48050					NOVEMBER 15TH				

ST. MARY'S - PINCKNEY

Address	832 PUTNAM ST.					Form Required:	Yes	No	
City	PINCKNEY	State	MI	Zip	48169	Grave Location Required on Memorial:	Yes	No	
Phone	(734) 878-2940					Symbol Required on Memorial:	Yes	No	
Fax						If yes, what symbol? Cross		, <u>.</u>	
Email						Benches Permitted:	Yes	No	
Contact		Phone				Borders Required on Foundation:	Yes	No	
FOUNDA ⁻	ΓΙΟΝ FEE:								
FOUNDA	ΓΙΟΝS ARE .50 PSI PLUS	2" ON EAC	CH SIDE, \$	150.00 MINIMU	JM				
Notes:									
Installatio	n Fee Payable to:					Spring delivery begins (date):			
GARY NIC	CHOLAS								
832 PUTN	IAM ST.					Fall/Winter Delivery "cutoff" (date):			
PINCKNE	Y, MI 48169								

ST. MARYS - WAYNE

Address	MICHIGAN AVE.					Form Required: FORM	Yes	Х	No	
City	WAYNE	State	MI	Zip	48184	Grave Location Required on Memorial	: Yes		No	Х
Phone	(734) 721-8745					Symbol Required on Memorial:	Yes	Х	No	
Fax	(734) 721-0260					If yes, what symbol? Cross			_	
Email						Benches Permitted:	Yes		No	Х
Contact	MS. GRIFFIN	Phone				Borders Required on Foundation:	Yes	Х	No	
						2" border required			_	
			Ru	les & Regulat	ions - Installation	Fee				
FOUNDA [*]	TION FEE:									
	MINIMUM \$200.00									
	·									
INCH MEI	MORIALS TO DO FOUNDA	ATION								
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 #	OF CREMAIN	NS PER GRAVE	E: 6					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
INCH MEI	MORIALS					WEATHER PERMITTING				
580 SOUT	TH MAIN					Fall/Winter Delivery "cutoff" (date):				
NORTHVI	LLE, MI 48167					WEATHER PERMITTING				

ST. MICHAEL - RICHMOND

Address	1/4 MILE N. OF GRATIO	T AVE. ON	l M19			Fo	rm Required:	FORM	Yes	X	No	
City	RICHMOND	State	MI	Zip	48062	Gr	ave Location R	equired on Memor	rial: Yes		No	Х
Phone	(586) 727-5215					Sy	mbol Required	on Memorial:	Yes	Χ	No	
Fax	(586) 727-3760						If yes, what sym	nbol? Christian syn	mbol		1	
Email	RFILLHAR@HOTMAIL.C	<u>OM</u>				Ве	enches Permitte	ed:	Yes		No	Х
	BOB FILLHART ION. SVCS - MS.UNLIMITED@Y	Phone 'AHOO.COM		27-5215 3853 EXT 22	HOME (586) 727-		orders Required	on Foundation:	Yes		No	X
				Rules & Re	gulations - Ins	stallation Fe	e					
FLUSH, E	BEVELS, SLANTS, AND M	ONUMENT	ΓS.									
FOUNDA	TION FEE:											
ALL FOU	NDATIONS - \$0.65/SQ. IN	CH CALC	JLATED	ON BASE S	SIZE (3-1-24)							
VA MARE	BLE UPRIGHT INSTALL FE	E: \$190										
VA BRON	IZE HEADSTONE MOUNT	ING: \$125	i									
CEMETE	RY RUN BY:					Single Fo	aundation May	imum: 30 inches v	wido			
	ST. AUGUSTINE PARISI	4				_		ximum: 60 inches				
	6035 S. MAIN ST.							nches from ground				
	RICHMOND, MI 48062					Maximu	m Depth 16 inc	ches				
CONTAC	T KERRY SHUTTLEWOR	TH FOR C	URRENT	PRICES - I	Home (586) 72	27-9062 Ce	II (586) 453-385	53				
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMA	INS PER GR	RAVE: 2 OR 1 FL	ULL AND 1 CR	REMATION PER	GRAVE				
Installatio	on Fee Payable to and Ma	ail to:				Sp	oring delivery l	begins (date):				
MONUME	ENT SERVICES UNLIMITE	D CASI	H, CHEC	K		W	EATHER PERI	MITTING				
37640 30	MILE RD.					Fa	ıll/Winter Deliv	ery "cutoff" (date)):			
LENOX, N	И 48050					W	EATHER PERM	MITTING				

ST. NICHOLAS

									٦ .	
Address	ON GROVELAND AVE., \	WEST OF W.	BOULEV	'ARD DR.		Form Required:	Yes		No	Х
City	FLINT	State	MI	Zip	48505	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 744-0070					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 744-4880					If yes, what symbol?			_	
Email	cfirman@covenantcem	etery.com				Benches Permitted: Prior approval	Yes	Χ	No	
Contact	CATHY FIRMAN	Phone	(810)	767-2621		Borders Required on Foundation:	Yes	Χ	No	
<u>, </u>	RECORDS DEPT @ C	HURCH				2" border required				
				Rules & F	Regulations - Installation	n Fee				
FLUSH, S	SLANTS, BEVELS, AND	MONUMEN	TS.							
FOUNDA	TION FEE:									
.65 PSI, \$	3129.60 MINIMUM									
ADD 2" B	ORDER ALL THE WAY	AROUND TO	FIGUR	RE FEE.						
Notes: #	OF FULL BURIALS PER G	RAVE: 1 # O	F CREM	AINS PER (GRAVE: 2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installation	on Fee Payable to:					Spring delivery begins (date):				
FENTON	CEMETERY SERVICES	3				WEATHER PERMITTING				
2020 EAS	ST HILL RD.					Fall/Winter Delivery "cutoff" (date):				
GRAND E	BLANC, MI 48439					WEATHER PERMITTING				

ST. PATRICK (OLD) CATHOLIC

Address	5671 WHITMORE LAKE	ROAD				Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip	48105	Grave Location Required on Memorial:	Yes		No	Х
Phone	N/A					Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A					If yes, what symbol?				
Email	omarcaigh@att.net					Benches Permitted:	Yes		No	Х
Contact	JOHN MARKEY		Phone	(248) 231-411	3	Borders Required on Foundation:	Yes	Х	No	
	DEBBIE WELCH (SECRI	ETARY)	Phone	(734) 662-814	1 1	2" border required on all side	s		_	
			Ru	ıles & Regulati	ons - Installation	Fee				
FOUNDA	TION FEE:									
	PLUS 2" BORDER ON EA	CH SIDE								
Notoci #	OF FULL BURIALS PER GR	۸۱/۲۰ ۱ ۴ ۲۰۱	CDEMAIN	C DED CDAVE.		CDEMATION DED CDAVE				
NOIES. #	OF FULL BURIALS PER GR	AVE. I # OI	CREMAIN	S PER GRAVE.	2 OK 1 FULL AND	CREWATION FER GRAVE				
Installati	on Ego Payable to:					Spring delivery begins (data):				
	on Fee Payable to:	-0.110				Spring delivery begins (date):				
	AIGH OUTDOOR SERVICE	=5, LLC				MAY 15TH				
	JRRIE RD.					Fall/Winter Delivery "cutoff" (date):				
SOUTH L	YON, MI 48178					OCTOBER 15TH				

ST. PATRICK'S CALVARY

							_		_	
Address	711 RICKETT ROAD					Form Required:	Yes		No	Х
City	BRIGHTON	State	MI	Zip	48116	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 229-9863					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 220-0730					If yes, what symbol?			_	
Email	NBMEMORIALS@AOL.C	<u>OM</u>				Benches Permitted:	Yes	Χ	No	
Contact	GARY NICHOLAS (SEXTON	Phone	(734) 878	-2940		Borders Required on Foundation:	Yes	Χ	No	
						2" border required on all side	S			
			Ru	ıles & Regulat	tions - Installatior	n Fee				
MARKER	S AND MONUMENTS CAN	NNOT BE I	DELIVERED	O IF THERE IS	NO FOUNDATIO	N.				
FOUNDA	TION FEE:									
FLUSH, E	BEVELS, SLANTS AND MC	NUMENT	S							
FOUNDA	TIONS ARE .50 PSI PLUS	2" ON EA	CH SIDE, \$	150.00 MINIM	UM					
20"x 10" ((FLUSH CREMAINS) - \$150	0.00								
24"x 12" -	- \$179.20									
36"x 12" -	- \$256.00									
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREI	MAINS PER G	RAVF· 2					
1101001 11	01 1 022 Bottii (201 21t)	<u> </u>	# O1 O1121							
Installation	on Fee Payable to:					Spring delivery begins (date):				
GARY NI	CHOLAS					MAY 15TH				
832 PUTI	NAM ST.					Fall/Winter Delivery "cutoff" (date):				
PINCKNE	Y. MI 48169					OCTOBER 15TH				

ST. PATRICK'S - CARLETON

Address						Form Required:	Yes	No	
City		State	MI	Zip		Grave Location Required on Memorial:	Yes	No	
Phone						Symbol Required on Memorial:	Yes	No	
Fax						If yes, what symbol?			
Email						Benches Permitted:	Yes	No	
Contact	DAVE MARTEL	Phone	(734) 654	-2500		Borders Required on Foundation:	Yes	No	
			(734) 621	-8950					
			Ru	ıles & Regulations - In	stallation	Fee			
SINGLE (GRAVE - MAX 24" LENGT	H x 22" HIG	ЭH						
FOUNDA	TION FEE:								
.45 PSI									
Netee									
Notes:									
Installatio	on Fee Payable to:					Spring delivery begins (date):			
	RACE PARISH					opining delivery begins (date).			
2996 W. I						Fall/Winter Delivery "cutoff" (date):			
						an winter benivery cuton (uate).			
CARLET	ON, MI 48117								

ST. PAUL

									$\overline{}$
Address	157 LAKE SHORE ROAD					Form Required:	Yes	No	Х
City	GROSSE POINTE FARMS	State	MI	Zip	48236	Grave Location Required on Memorial:	Yes	No	Х
Phone	(313) 881-6687					Symbol Required on Memorial:	Yes	No	Х
Fax	(586) 668-0275					If yes, what symbol?			
Email	jpetersmith@comcast.net					Benches Permitted:	Yes	No	Х
Contact	JOSEPH SMITH FOREVER GREEN LAND	Phone SCAPING	(313) 881 CO.	-6687		Borders Required on Foundation:	Yes	No	Х
			Ru	ıles & Regulat	tions - Installation	n Fee			
BRONZE	FLUSH, BEVELS, SLANTS	S AND MO	DNUMENTS	3					
FOREVE	R GREEN PUTS IN THE FO	DUNDATIO	ON. PLEAS	SE CALL BILL	SMITH FOR FOU	NDATION FEE.			
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN:	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE			
Installatio	on Eog Payable to:					Spring delivery begins (date):			
	on Fee Payable to:	00				Spring delivery begins (date):			
	R GREEN LANDSCAPING	CO.				YEAR ROUND			
P.O. BOX						Fall/Winter Delivery "cutoff" (date):			
IGROSSE	POINTE FARMS, MI 48236	6				YEAR ROUND			

ST. PETER'S CATHOLIC- MT. CLEMENS

								11	
	43755 ELIZABETH RD.					Form Required:	Yes	No	Х
City	CLINTON TWP.	State	MI	Zip	48036	Grave Location Required on Memorial:	Yes	No	Х
Phone	(586) 493-0086 (CEMETI	ERY)				Symbol Required on Memorial:	Yes	No	Χ
Fax	(586) 684-1868					If yes, what symbol?		, i	
Email	cemeteryspmc@gmail.co	<u>om</u>				Benches Permitted:	Yes	No	Χ
Contact	ROGER DARLING 586-243-0795 Cell	Phone	(586) 468- (CHURCH			Borders Required on Foundation:	Yes	No	Χ
			Ru	les & Regulati	ions - Installation	Fee			
GRANITE	AND BRONZE FLUSH M	ARKERS, S	SLANTS, M	ONUMENTS A	ND LEDGERS. N	MAXIMUM			
SLANT H	EIGHT IS 18", MAXIMUM	MONUMEN	IT BASE LE	ENGTH IS 60".	NO MARBLE AL	LOWED.			
	S ALLOWED ON SLANT								
	BRONZE - \$150.00 FOR C								
	·								
NO BEVE	LS ALLOWED								
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # O	F CREMAIN	S PER GRAVE	2 OR 1 FULL AND 1	CREMATION PER GRAVE			
In atalla (*)	Fac Barrella tar					Cusing deligens having (det.)			
	on Fee Payable to:					Spring delivery begins (date):			
	R'S CEMETERY					APRIL 1ST			
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):			
						DECEMBER 1ST			

ST. PETER'S LUTHERAN - EAST POINTE

Address	22950 GRATIOT AVE.					Form Required:	Yes		No	Х
City	EAST POINTE	State	MI	Zip	48021	Grave Location Required on Memorial:	Yes		No	Х
Phone						Symbol Required on Memorial:	Yes		No	Χ
Fax	(586) 362-8962					If yes, what symbol?			-	
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	CINDY ODREN	Phone	(586) 201	-5965		Borders Required on Foundation:	Yes	Х	No	
			(Cell)			Call for foundation restrictions				
			Ru	les & Regulat	ions - Installation	Fee				
FOUNDA	TION FEE: VARIES - PLEA	ASE CALL	FOR PRICI	NG						
Notes: #	OF FULL BURIALS PER G		# OF ODE	AAINO DED CI						
Notes. #	OF FULL BUNIALS FER O	JNAVE. I	# OF CKEN	VIAINS PER GI	CAVE. OF 10 4					
Installati	on Fee Payable to:					Spring delivery begins (date):				
	_	DV								
	ER'S LUTHERAN CEMETE	ΚY				WEATHER PERMITTING				
	RATIOT AVE.					Fall/Winter Delivery "cutoff" (date):				
EAST PO	INTE, MI 48021					WEATHER PERMITTING				

ST. PETER'S LUTHERAN - MACOMB

Address	17051 24 MILE RD.					Form Required:	Yes	No
City	MACOMB	State	MI	Zip	48042	Grave Location Required on Memorial:	Yes	No
Phone	(586) 781-3434					Symbol Required on Memorial:	Yes	No
Fax						If yes, what symbol?		<u> </u>
Email						Benches Permitted:	Yes	No
Contact	FREIDA	Phone	(586) 78	1-3434		Borders Required on Foundation:	Yes	No
			R	ules & Regulat	ions - Installation	Fee		
CALL FO	R PRICING							
Notes:								
Installatio	on Fee Payable to:					Spring delivery begins (date):		
						Fall/Winter Delivery "cutoff" (date):		

ST. ROBERTS

Address	CARPENTER RD.				Form Required:	Yes		No	Χ
City	FLUSHING TOWNSHIP	State	MI Zip		Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 735-5050 OR (810)	659-2501			Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 735-9514				If yes, what symbol?				
Email	N/A				Benches Permitted:	Yes	Х	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 695-5166 (810) 735-9514		Borders Required on Foundation:	Yes		No	Χ
			Rules & Regula	ations - Installation	Fee				
FLUSH, S	LANTS, BEVELS & MONU	IMENTS							
FOUNDA [®]	<u>ΓΙΟΝ FEE:</u>								
.50 PSI, \$	150.00 MINIMUM								
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS PER GRAVE	E: 2 OR 1 FULL AND 1	CREMATION PER GRAVE				
									_
Installatio	on Fee Payable to:				Spring delivery begins (date):				
GENESE	E VALLEY VAULT				WEATHER PERMITTING				
10510 N.	HOLLY RD.				Fall/Winter Delivery "cutoff" (date):				
HOLLY, M	II 48442				WEATHER PERMITTING				

ST. THOMAS

Address	300 SUNSET RD.					Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip	48103	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 663-5018					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 663-2847					If yes, what symbol?				
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Х	No	
Contact	BRAD BOUCHIE	Phone	(734) 274-	7422		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulat	ions - Installation	Fee				
FOUNDA [*]	TION FEE:									
.65 PSI, M	IINIMUM \$200.00									
BRONZE,	FLUSH GRANITE, SLANT	S, BEVEL	S, AND MO	NUMENTS						
34" MAXII	MUM FOR SINGLE									
MIN 4" TH	IICK GRANITE/MARBLE. A	ALL MEMO	RIALS MUS	ST COMPLY V	VITH THE CEMET	ERY APPEAL,				
NON TRA	DITIONAL MONUMENTS	WILL NEE	D TO BE AI	PPROVED BE	FORE PLACEMEN	NT.				
(THE CEN	METERY HAS A RIGHT TO	REMOVE	OR NOT	ACCEPT AN U	INDESIRED MONU	JMENT)				
Notes: # (OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
BRAD BO	UCHIE					WEATHER PERMITTING				
4651 KEH	OE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	, MI 49236					OCTOBER 1ST				

STILES

Address	1900 N. SAGINAW					Form Required:	Yes	No	Х
City	LAPEER	State	MI	Zip	48446	Grave Location Required on Memorial:	Yes	No	Х
Phone	(810) 664-0821					Symbol Required on Memorial:	Yes	No	Х
Fax	(810) 664-1639					If yes, what symbol?			
Email	jschlaud@mayfieldtowns	hip.com				Benches Permitted:	Yes	No	Х
Contact	Julie A. Schlaud	Phone	(810) 664-	0821		Borders Required on Foundation:	Yes	X No	
http://www	v.mayfieldtownship.com/St	iles_Cemet	ery.html			2" around (base of marker)			
			Rul	es & Regulati	ons - Installation	Fee			
FLUSH, B	EVELS, SLANTS AND MO	DNUMENTS	S.						
.35 PSI w	th 2" border all 4 sides.								
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # O	F CREMAINS	S PER GRAVE:	2 OR 1 FULL AND	CREMAIN PER GRAVE			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
	D TOWNSHIP					WEATHER PERMITTING			
(SAME A	DDRESS AS ABOVE)					 Fall/Winter Delivery "cutoff" (date):			
Ì	,					WEATHER PERMITTING			

STONEY CREEK

									 4	
Address	570 E. TIENKEN						Form Required:	Yes	No	Х
City	ROCHESTER	State	MI	Zip	48309		Grave Location Required on Memorial:	Yes	No	Χ
Phone	(248) 656-4630						Symbol Required on Memorial:	Yes	No	Χ
Fax	(248) 656-4744						If yes, what symbol?		-	
Email	CLERKSOFFICE@ROCH		IILLS.ORG	<u> </u>			Benches Permitted:	Yes	No	Х
	leachc@rochesterhills.org	Į.					Borders Required on Foundation:	Yes	No	Х
Contact	CALVIN 248-652-4713	Cemete	ry 248-601	-9429						
			ı	Rules & Regi	ulations - Ir	nstallation	Fee			
FLUSH, E	BEVELS, SLANTS AND MO	NUMEN	гѕ							
FOUNDA	TION FEE: 1.00 PSI									
Notes: #	OF FULL BURIALS PER GRA	AVE: # (OF CREMA	INS PER GRA	VE: OR F	ULL AND	CREMATION PER GRAVE			
						•				
Installatio	on Fee Payable to:						Spring delivery begins (date):			
CITY OF	ROCHESTER HILLS, CLE	RK'S OFF	FICE				WEATHER PERMITTING			
1000 RO	CHESTER HILLS DRIVE						Fall/Winter Delivery "cutoff" (date):			
ROCHES	TER HILLS, MI 48308						WEATHER PERMITTING			

SUNSET HILLS - FLINT

Address	G-4413 FLUSHING ROAL)				Form Required: FORM	Yes	X	No	
City	FLINT	State	MI	Zip	48504	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(810) 732-0260					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 732-0260					If yes, what symbol?			•	
Email						Benches Permitted:	Yes		No	Х
Contact	SECRETARIAL STAFF	Phone	(810) 732-	-0260		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulat	ions - Installation	Fee				
MONUME	NTS ALLOWED IN SECTI	ONS A-C-								
	METERY FOR SPECIFIC I									
	NIMUM 3'6"x 1'2"	•								
	ИUM 2'6"x 2'	BASE MA	XIMUM 6'4	"x 1'6"						
	TION FEE: .50 PSI	DIE MAX	IMUM 5'x 2'	8"						
	RANITE AND BRONZE M				EES:					
16"x 8" G	RANITE OR BRONZE \$120	0.00 (INFA	NT)							
24"x 12" (GRANITE - \$272.00									
24"x 12" (OR 14" BRONZE - \$272.00	(Add \$120	.00 with a v	ase)						
54" x 12"	GRANITE - \$420.00 (COM	PANION, C	ONLY SIZE	ALLOWED)						
44"x 12" (OR 14" BRONZE - \$420.00	(COMPAN	IION, WITH	OR W/O VAS	SE)					
NO CAME	OS ALLOWED - MUST B	E LASER (ON JET BL	ACK.						
Notes: #	OF FULL BURIALS PER GRA	AVE: # OF	CREMAINS	PER GRAVE: 2	OR 1 FULL AND C	REMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	HILLS CEMETERY					APRIL 16TH (MONDAY THRU FRIDAY	ONLY	·)		
	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):		,		

OCTOBER 31ST

SUNSET HILLS - YPSILANTI

									_	
Address	9470 FORD RD.					Form Required:	Yes		No	Х
City	YPSILANTI	State	MI	Zip	48198	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 480-3050					Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 641-9400					If yes, what symbol?			_	
Email	covenantwest@hotmail.co	<u>om</u>				Benches Permitted: See note below	Yes	Х	No	
Contact	VIRGINIA CARTER	Phone	(734) 480	-3050		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulat	ions - Installatior	ı Fee				
FLUSH M	IARKER AND MONUMENT	SECTION		•						
FOUNDA	TION FEE:									
Formula f	or install: (ex: 24x12x4) Le	ngth 24x16	.5=\$396.00							
\$396.00 F	FOR FLAT MARKERS 24"x	: 12"x 4" - L	ONGEST L	ENGTH X 15						
SINGLE	GRAVE MAX WIDTH IS 36	" - UNLES	S TWO SID	E-BY-SIDE LC	OTS MAX LENGTH	HIS 72"				
NO BRO	NZE ALLOWED									
*BENCHE	ES HAVE TO SHARE TWO) GRAVES	AND MUS	『BE A PEDIS [™]	TAL WITH A MAT	CHING GRANITE BASE.				
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN:	S PER GRAVE:	3 OR 1 FULL AND	2 CREMAINS PER GRAVE				
Installation	on Fee Payable to: <u>Cash</u> 8	& Check A	ccepted			Spring delivery begins (date):				
	WN CEMETERY					MARCH 15TH				
31472 MI	CHIGAN AVE.					Fall/Winter Delivery "cutoff" (date):				
WAYNE,	MI 48184					NOVEMBER 15TH				

SUNSET MEMORIAL GARDENS

									-	
Address	3720 KEEWAHDIN ROAL	٥				Form Required:	Yes		No	Χ
City	FORT GRATIOT TWP	State	MI	Zip	48059	Grave Location Required on Memorial:	Yes	Х	No	
Phone	(810) 385-4489					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 385-9010					If yes, what symbol?			-	
Email	slynch@fortgratiot.us					Benches Permitted:	Yes		No	Х
Contact	SHELLY LYNCH	Phone	(810) 3	385-4489		Borders Required on Foundation:	Yes		No	Χ
				Rules & Regula	ations - Installation	 n Fee				
ALL FLUS	SH, GRANITE AND BRONZ	ZE				Cash and Checks Only				
FOUNDA	TION FEE:									
SINGLE -	\$43.00 - 24"x 12"x 4									
DOUBLE	- \$64.00 - 36"x 12" x 4"									
EXTRA L	ARGE - \$96.00 - 46"x 14"x	. 4"								
ANY NON	N-STANDARD SIZE MAKEI	R15 PSI	OF SUF	RFACE AREA.						
MILITAR	Y BRONZE W/BASE 24"x 1	∤2"x 4" - \$5	3.00							
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	OF CREM.	AINS PER GRAVE	≣: 3 OR 1 FULL ANE) 2 CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FORT GF	RATIOT CHARTER TOWN	SHIP				YEAR ROUND				
3720 KEE	EWAHDIN ROAD					Fall/Winter Delivery "cutoff" (date):				
FORT GE	RATIOT. MI 48059					YEAR ROUND				

THAYER

									1	
Address	NAPIER & 6 MILE RD.					Form Required:	Yes		No	Х
City	NORTHVILLE TWP.	State	MI	Zip		Grave Location Required on Memorial:	Yes	Х	No	
Phone	(734) 453-0608					Symbol Required on Memorial:	Yes		No	Χ
Fax						If yes, what symbol?			1	
Email	tillie.vansickle@yahoo.co	<u>m</u>				Benches Permitted:	Yes	Х	No	
Contact	TILLIE VAN SICKLE	Phone	(734) 453-	-0608		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulations - Ir	nstallation	Fee				
FLUSH, S	SLANTS, AND MONUMEN	TS. NOTH	ING OVER	3' HIGH.						
FOUNDA	TION FEE: .65 PSI									
Notes: #	OF FULL BURIALS PER GR	AVE: # O	F CREMAINS	S PER GRAVE: OR F	ULL AND	CREMATION PER GRAVE				
	on Fee Payable to:					Spring delivery begins (date):				
	OUTDOOR SERVICE, INC		act Tim Car	rr		WEATHER PERMITTING				
48910 FC	ORD RD.	Phone (734	459-8880			Fall/Winter Delivery "cutoff" (date):				
CANTON	, MI 48187	Fax (734) 459-9042			WEATHER PERMITTING				

THETFORD TOWNSHIP

THETFORD TOWNSHIP

(SAME ADDRESS AS ABOVE)
https://www.thetfordtwp.com/clerk

Address	4014 E. VIENNA RD.					Form Required:	Yes		No	Х
City	CLIO	State	MI	Zip	48420	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 686-5200					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 686-9394					If yes, what symbol?			_	
Email	dclerk@thettwp.com					Benches Permitted:	Yes	Χ	No	
Contact	ROY HATCHETT OR	Phone	(810) 686	6-5200		Borders Required on Foundation:	Yes	Χ	No	
	LEANNE PENNINGTON					2" border required				
			Ru	ıles & Regu	ılations - Installatioı	n Fee				
BRONZE,	FLUSH GRANITE, BEVEL	S, SLANT	S, AND M	ONUMENTS	S. VASES ALLOWED	O ON BRONZE.				
ONE GRA	<u>VE</u>				TWO GRAVES					
24"x 12" C	ON A 28"x 18" FOUNDATIO	ON - \$85.00)		44"x 12" ON A 48"x	20" FOUNDATION - \$110.00				
24"x 14" C	ON A 28"x 18" FOUNDATIO	ON - \$90.00)		44"x 14" ON A 48"x	20" FOUNDATION - \$110.00				
32"x 12" C	ON A 38"x 18" FOUNDATIO	ON - \$95.00)		46"x 12" ON A 48"x	20" FOUNDATION - \$110.00				
32"x 14" C	ON A 38"x 18" FOUNDATIO	ON - \$95.00)		46"x 14" ON A 48"x	20" FOUNDATION - \$110.00				
36"x 10" C	ON A 38"x 18" FOUNDATIO	ON - \$95.00)		48"x 12" ON A 56"x	20" FOUNDATION - \$115.00				
36"x 12" C	ON A 38"x 18" FOUNDATIO	ON - \$95.00)		48"x 14" ON A 56"x	20" FOUNDATION - \$115.00				
40"x 12" C	ON A 44"x 18" FOUNDATIO	ON - \$100.0	00		52"x 12" ON A 56"x	20" FOUNDATION - \$115.00				
40"x 14" C	ON A 44"x 18" FOUNDATIO	ON - \$100.0	00		52"x 14" ON A 56"x	20" FOUNDATION - \$115.00				
42"x 12" C	ON A 44"x 18" FOUNDATIO	ON - \$100.0	00		FOUNDATION OF 5	56"x 22" - \$120.00				
42"x 14" C	ON A 44"x 18" FOUNDATIO	ON - \$100.0	00		FOUNDATION OF 7	72"x 18" (FENTON) - \$165.00				
BRONZE	FOR VA - \$95.00				FOUNDATION OF 7	76"x 18" - \$185.00				
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CRE	MAINS PE	R GRAVE: 4					
Installatio	on Fee Payable to:					Spring delivery begins (date):				

APRIL 1ST

NOVEMBER 1ST

Fall/Winter Delivery "cutoff" (date):

TRINITY

5210 MT. ELLIOTT

DETROIT, MI 48211

Mail checks to Trinity

								 -	
Address	5210 MT. ELLIOTT					Form Required:	Yes	No	Χ
City	DETROIT	State	MI	Zip	48211	Grave Location Required on Memorial:	Yes	No	Х
Phone	(313) 921-0286					Symbol Required on Memorial:	Yes	No	Χ
Fax						If yes, what symbol?		 •	
Email	trinitycemetery5210@gma	ail.com				Benches Permitted:	Yes	No	Х
Contact	Camille	Phone	(313) 921	-0286		Borders Required on Foundation:	Yes	No	Χ
			Rı	ıles & Regulat	ions - Installation	Fee			
GRANITE	FLUSH MARKERS AND I	LEDGERS.							
DELIVER	IES ONLY TUES & FRI 10	-12:30							
MUST NO	OTIFY CEMETERY 2 DAYS	BEFORE	DELIVERY	Y VIA EMAIL					
FOUNDA	TION FEE:								
24"x 12"x	4" - \$375.00								
SLANTS	(allowed only in Sec. CR) -	24"x 10"x 1	16" - \$475.0	00					
HALF LE	DGERS - \$675.00. FULL L	.EDGERS -	\$875.00						
NOTE: FO	OR LEDGERS, PERSON I	MUST BE D	DECEASEL	O (no pre-need	I) - CALL FOR PLA	ACEMENT.			
ONLY FL	USH ALLOWED IN THE N	EW GARD	ENS						
LASERED) IMAGES ARE ACCEPTA	BLE							
We DO N	OT accept cameos unless	production	began bef	ore Winter 202	1				
Trinity Ce	metery has the right to refu	ise any hea	dstone if th	nese requireme	ents are not met.				
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	S PER GRAVE: 2	2 OR 1 FULL AND 2	CREMAINS PER GRAVE			
Installatio	on Fee Payable to:			Cash & Chec	ck	Spring delivery begins (date):			
TRINITY	CEMETERY			CC by phone	е	WEATHER PERMITTING			

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

TYLER

										_		
Address	TYLER RD. & HANNAN F	RD.				Form Required:	Yes		No	Χ		
City	WAYNE	State	MI	Zip	48184	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(734) 699-8900 ext 6					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(734) 699-5213					If yes, what symbol?						
Email	bbeaudry@vanburen-mi.c	org				Benches Permitted:	Yes		No	Х		
Contact	BRITTANY BEAUDRY	Phone	(734) 699	-8909		Borders Required on Foundation:	Yes		No	Х		
			D.,	las 8 Danulat	iana luatallatian	F						
Rules & Regulations - Installation Fee												
CHARTER TOWNSHIP OF VAN BUREN, KIRK, CHUCK OR SAM, TO STAKE GRAVE. THE FAMILY IS												
RESPONSIBLE FOR FOUNDATION/INSTALLATION. NO SUNDAY OR HOLIDAY BURIALS.												
INCH TO INSTALL FOUNDATIONS: \$1.00 PSI												
FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)												
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE						
Installation Fee Payable to: Checks Only						Spring delivery begins (date):						
CHARTER TOWNSHIP OF VAN BUREN						APRIL 1ST						
46425 TY	LER ROAD		Fall/Winter Delivery "cutoff" (date):									
BELLEVII	LE, MI 48111			NOVEMBER 30TH								

UNION CORNERS

Address	SQUARE LAKE RD.					Form Required: FORM	Yes	Х	No			
City	TROY	State	MI	Zip	48085	Grave Location Required on Memorial:	Yes	Х	No			
Phone	(248) 524-3489					Symbol Required on Memorial:	Yes		No	Χ		
Fax	(248) 524-1770					If yes, what symbol?						
Email	K.BOVENSIEP@TROYM	I.GOV				Benches Permitted:	Yes		No	Х		
	KURT BOVENSIEP or ION. SVCS - MS.UNLIMITED@Y	Phone 'AHOO.COM	(248) 524- (586) 453-385		E (586) 727-9062	Borders Required on Foundation:	Yes		No	Χ		
Rules & Regulations - Installation Fee												
FOUNDATION FEE:												
ALL FOUNDATIONS - \$0.65/SQ. INCH CALCULATED ON BASE SIZE (3-1-24)												
VA MARBLE UPRIGHT INSTALL FEE: \$190												
VA BRONZE HEADSTONE MOUNTING: \$125												
CITY OF TROY REQUIRES A 48 HOUR NOTICE FOR A FULL BURIAL												
AND A 24 HOUR NOTICE FOR A CREMAINS BURIAL												
CONTAC	T KERRY SHUTTLEWOR	TH EOD OI	IDDENIT DI	DICES Home	(586) 727 0062	Coll (596) 452 2952						
CONTAC	I RERKT SHOTTLEWOR	ITI FOR CO	NKENI FI	NICES - HOITIE	(300) 727-9002	Cell (360) 433-3633						
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE												
Installatio	on Fee Payable to and Ma	ail to:				Spring delivery begins (date):						
	ENT SERVICES UNLIMITE		, CHECK			YEAR ROUND DELIVERY						
37640 30						Fall/Winter Delivery "cutoff" (date):						
	MI 48050					YEAR ROUND DELIVERY						

UNION UDELL

									-	
Address	TEXTILE RD (BET. TUTT	TLE HILL &	BUNTON I	RDS)		Form Required:	Yes		No	Χ
City	ANN ARBOR	State	MI	Zip	48197	Grave Location Required on Memorial:	Yes		No	Х
Phone	734-274-7422					Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?			-	
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Х	No	
Contact	BRAD BOUCHIE	Phone	(734) 274	-7422		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulat	ions - Installation	n Fee				
BRONZE	, FLUSH GRANITE, SLAN	TS, BEVEL	.S, AND MC	NUMENTS						
FOUNDA	TION FEE:									
.65 PSI, N	//INIMUM \$200.00									
ALL BASI	ES FOR MONUMENTS MU	JST BE NO	LONGER	THAN 34" ON	A SINGLE GRAV	E				
**ALL MA	RKERS ARE SUBJECT TO	O THE APF	PROVAL OF	R DENIAL OF	THE CEMETERY	BOARD.				
	*ALL MARKERS ARE SUBJECT TO THE APPROVAL OR DENIAL OF THE CEMETERY BOARD.									
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAINS	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payable to: <u>CASH</u>	CHECKS	<u>ONLY</u>			Spring delivery begins (date):				
BRAD BC	OUCHIE					WEATHER PERMITTING				
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	I, MI 49236					OCTOBER 1ST				

UNITED MEMORIAL GARDENS

Address	4800 CURTIS RD.					Form Required: FORM	Yes	Χ	No	
City	PLYMOUTH	State	MI	Zip	48170	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 454-9448					Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 454-7609					If yes, what symbol?				
Email						Benches Permitted-With Placement Form	Yes	Χ	No	
Contact MMG	JOE / JENNIFER	Phone	(734) 454-	-9448		Borders Required on Foundation:	Yes		No	Χ
			Ru	les & Regulati	ons - Installation	Fee				
FLUSH G	RANITE AND BRONZE ON	NLY. FULL	LEDGERS	S AND HALF LE	EDGERS ALLOW	ED. ALL BRONZE				
MUST BE	MOUNTED ON GRANITE	BEFORE	DELIVERY	. ANY COLOR	GRANITE BRON	ZE BASE ALLOWED.				
NO SLAN	TS AS OF 2010 RULING									
All Memo	rials and Benches require N	Memorial Ap	pplication a	nd Approval						
	FEES:									
	Flagging Fee:	\$175.00 F	ayable to L	Jnited Memoria	l Gardens					
	Setting Fee:	\$1.00 PSI	payable to	Inch Memorial	S					
	Foundation Fee:	\$1.00 PSI	Payable to	United Memor	rial Gardens					
MEMORIA	AL REMOVAL FEE: \$75.00	0				ISLAMIC GARDENS - SECTION 1 - 36	" WIDE I	MAX		
BENCHE	S REQUIRE A GRANITE B	ASE				SECTIONS 2 & 3 - 32	" WIDE I	MAX		
\$1.00 PSI	OF BASE FOR MONUME	NTS AND E	BENCHES	- BASE IS FOL	JNDATION FOR E	BENCHES.				
UMG STA	TED MUST BE FLAT FLU	SH BUT TH	HERE ARE	SOME ABOVE	GROUND					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				

Installation Fee Payable to: CASH CHECK
UNITED MEMORIAL GARDENS CC VIA PHONE

(SAME ADDRESS AS ABOVE)

Spring delivery begins (date): WEATHER PERMITTING
Fall/Winter Delivery "cutoff" (date): BEFORE NOV. 15TH

(TAKE TO LOT). AFTER NOV. 15TH (NO MARKER

STORAGE). \$75.00 STAKE OUT FEE

<u>UTICA</u>

Address	46325 SHELBY RD.					Form Required:	Yes	No	Χ
City	SHELBY TOWNSHIP	State	MI	Zip	48315	Grave Location Required on Memorial:	Yes	No	Х
Phone	(586) 703-8453					Symbol Required on Memorial:	Yes	No	Х
Fax	N/A					If yes, what symbol?		-	
Email	CCUDDINGTON3@GMA	AIL.COM				Benches Permitted:	Yes	No	Х
Contact	CHUCK CUDDINGTON (LAURA SALANSKI @ (5		` '	03-8453		Borders Required on Foundation:	Yes	No	
				Rules & Regula	tions - Installation	Fee			
FLUSH, B	EVELS, SLANTS AND MO	ONUMENT	S.						
FOUNDA [*]	ΓΙΟΝ FEE: 1.00 PSI								
24"x 12" -	\$288.00								
36"x 12" -	\$432.00								
48"x 12" -	\$576.00								
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CF	REMAINS PER	GRAVE: 2				
Installatio	on Fee Payable to:					Spring delivery begins (date):			
UTICA CE	METERY					WEATHER PERMITTING			
46237 SH	ELBY RD.					Fall/Winter Delivery "cutoff" (date):			
SHELBY	ΓWP., MI 48317					WEATHER PERMITTING			

VAN HOOSEN JONES

Installation Fee Payable to:

1000 ROCHESTER HILLS

ROCHESTER HILLS, MI 48309

CITY OF ROCHESTER HILLS, CITY CLERK

Address	570 TIENKEN ROAD					Form Required: FORM		Yes	Χ	No	
City	ROCHESTER	State	MI	Zip	48306	Grave Location Required of	on Memorial:	Yes		No	Χ
Phone	(= 10) 00= 11 10									No	Χ
Fax	(248) 601-9429					If yes, what symbol?				F	
Email	LEACHC@ROCHESTER	HILLS.OR(3			Benches Permitted:	Call first	Yes	Χ	No	
Contact	CALL CAL	Phone	(248) 652	-4713		Borders Required on Foun	ndation:	Yes		No	Х
						Cameos/Inserts Allowed o	n Memorial:	Yes		No	Χ
			Ru	ıles & Regulati	ions - Installation	Fee					
SECTION	1: Flush Markers Only	SECTIO	N 2: Famil	ly Plots - Monur	ments						
SECTION	S 3 - 6: Monuments, Slants	s, Bevels C	Only								
SECTION	7: Garden of Angels - Mor	numents O	nly								
SECTION	8: Cremations - Flush Mar	rkers									
NOT TO E	EXCEED 24"x 12" ON SING	LE GRAV	E AND 42"	x 12" ON DOU	BLE GRAVE. NO	VASES ALLOWED.					
NO GRAN	IITE BASES ALLOWED FO)R BRONZ	'E MARKE	RS.							
INSTALLA	TION FEE: .75 PSI										
MAX 32" S	SINGLE - MONUMENT										
MAX 54" [OOUBLE - MONUMENT										
12" WIDTI	H MAX ON BASE										
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CRE	EMAINS PER G	RAVE: 1						
OF	R 1 FULL AND 1 CREMATI	ON PER G	RAVE (CA	LL FIRST)							

Spring delivery begins (date):

APRIL 15TH

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST (UNLESS FOUNDATION IS IN)

WALLED LAKE

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

									-	
Address	LADD RD.				Form Required:		Yes	<u> </u>	No	Χ
City	WALLED LAKE	State	MI	Zip	Grave Location Requir	ed on Memorial:	Yes	<u> </u>	No	Χ
Phone	(248) 887-6700				Symbol Required on M	lemorial:	Yes		No	Χ
Fax	(248) 887-4487				If yes, what symbol?				7	
Email					Benches Permitted:	Call contact	Yes	<u> </u>	No	
Contact	MIKE WILLENBERG @		(248) 887	-6700	Borders Required on F	oundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANO	E		2" bord	der on all sides				
			Ru	les & Regulations - Insta	llation Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX PER GRAVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYP	PES\$25	0.00						
FLUSH SI	ETTING OF GRANITE & E	RONZE O	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BRO	ONZE ON C	CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT BA	SE.					
ADD 4" T0	O LENGTH AND WIDTH (OF BASE T	O DETERM	IINE FOUNDATION SIZE I	NEEDED.					
ADD \$50.	00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
CORNER	MARKERS (SET OF 4)	\$125.00								
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FOR B	UILT IN VASE)					
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CREM	MATION BURIALS PER G	RAVE: 2-4					
(C	ALL MIKE @ HURON CEN	METERY M	IAINTENAN	ICE FIRST)						
Installatio	on Fee Payable to:	CASH, CH	HECK		Spring delivery begin	ns (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

WASHTENONG MEMORIAL PARK

(SAME ADDRESS AS ABOVE)

Address	3771 WHITMORE LAKE F	RD.				Form Required: FORM	Yes	X	No	
City	ANN ARBOR	State	MI	Zip	48105	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 665-6187					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 665-3264					If yes, what symbol?			•	
Email	jlamont@midwest.memori	<u>ial</u>				Benches Permitted:	Yes	Х	No	
Contact MMG	JENNIFER LaMONT	Phone	(734) 665	5-6187		Borders Required on Foundation:	Yes		No	Χ
			Rı	ules & Regulati	ions - Installatio	n Fee				
ALL FLUS	H BRONZE ONLY. BRON	IZE MUST	BE ON A	GRANITE BASI	E. ANY COLOR	GRANITE BRONZE				
BASE ALL	OWED. VASES ALLOWE	D. BENC	HES ALLO	WED THROUG	SHOUT CEMETE	RY.				
MONUME	NTS ALLOWED ONLY IN	QUEEN O	F PEACE S	SECTION AND	MAPLE GROVE	SECTION.				
	FEES:									
	Flagging Fee:	\$175.00 F	Payable to	Washtenong M	emorial Park					
	Setting Fee:	\$1.00 PS	l payable to	o Inch Memorial	ls					
	Foundation Fee:	\$1.00 PS	l Payable to	o Washtenong I	Memorial Park					
MEMORI <i>A</i>	AL REMOVAL FEE: \$75.00)								
	OF FULL BURIALS PER G		# OF CRE	EMAINS PER G	RAVE: UP TO 4					
	OR 1 FULL AND UP TO 3 (
`	0227 0. 1000	2 <u></u>	2 . 2 310							<u> </u>
Installatio	on Fee Payable to:	ash, Ched	:k			Spring delivery begins (date):				
WASHTE	NONG MEMORIAL PARK	CC VIA P	hone			WEATHER PERMITTING				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

WATERFORD CENTER

WATERFORD, MI 48329

									1	
Address	PONTIAC LAKE & AIRPO	ORT RD.				Form Required:	Yes		No	Х
City	WATERFORD	State	MI	Zip	48329	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 618-7437					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 674-8658					If yes, what symbol?			_	
Email	mbellehumeur@waterford	<u>lmi.gov</u>				Benches Permitted:	Yes	Х	No	
Contact DPW	MARY BELLEHUMEUR BRETT THOMPSON: 248		(248) 618-	7437		Borders Required on Foundation:	Yes		No	Χ
			Rul	les & Regulat	ions - Installation	Fee				
FLUSH, C	GRANITE, BEVELS, SLAN	TS AND MO	ONUMENTS	S. SINGLE GF	RAVE IS <mark> TO BE N</mark>	O LARGER THAN 30".				
SECTION	A - MEMORIALS WILL BE	E BACK TO	BACK.			MAXIMUM COMPANION IS 48".				
NO ENG	IO ENGRAVING ON BACK SIDE.									
FOUNDA	TION FEE: 1.00 PSI - MIN	IIMUM \$28	8.00							
24"x 12" -	\$288.00	46"x 12" -	\$552.00							
30"x 12" -	\$360.00	48"x 12" -	\$576.00							
36"x 12" -	\$432.00	52"x 12" -	\$624.00							
42"x 12" -	\$504.00	46"x 14" -	\$644.00							
48"x 12" -	\$576.00	52"x 14" -	\$728.00							
VETERA	N FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED B	Y A REPRESI	ENTATIVE FROM	THE				
FAMILY A	AND SEXTON (BRETT TH	OMPSON 2	248-639-845	50).						
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 4	OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
WATERF	ORD TOWNSHIP					WEATHER PERMITTING (PLEASE CA	ALL FIF	RST)		
5240 CIV	C CENTER DR.					Fall/Winter Delivery "cutoff" (date):				

WEATHER PERMITTING (PLEASE CALL FIRST)

WEST BERLIN (OLD SANDHILL CEMETERY)

							Г	$\overline{}$	
Address	HOLEMS RD.					Form Required:	Yes	No	Х
City	ALLENTON	State	MI	Zip		Grave Location Required on Memorial:	Yes	No	Χ
Phone						Symbol Required on Memorial:	Yes	No	Х
Fax						If yes, what symbol?			
Email						Benches Permitted:	Yes	No	
Contact		Phone				Borders Required on Foundation:	Yes	No	
ı			ľ	Rules & Regulation	ons - Installation	ı Fee			
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Notes:									
Installation	on Fee Payable to:	Cash & C	heck			Spring delivery begins (date):			
JERRY P	EWINSKI					MARCH 15TH			
8051 ALM	IONT RD.					Fall/Winter Delivery "cutoff" (date):			
ALMONT	, MI 48003					NOVEMBER 15TH			

WESTLAWN

Address	31472 MICHIGAN AVE.					Form Required:	Yes	N	lo	Χ
City	WAYNE	State	MI	Zip	48184	Grave Location Required on Memorial:	Yes	N	lo	Χ
Phone	(734) 722-2530					Symbol Required on Memorial:	Yes	N	lo	Χ
Fax	(734) 641-9400					If yes, what symbol?			_	
Email	covenantwest@hotmail.co	<u>om</u>				Benches Permitted:	Yes	N	lo	Χ
Contact	VIRGINIA CARTER	Phone	(734) 722	-2530		Borders Required on Foundation:	Yes	N	lo	Χ
			Ru	les & Regulati	ons - Installation	Fee				
FLUSH G	RANITE, SLANTS AND M	ONUMENT	S. FLUSH	ONLY IN CER	TAIN SECTIONS	- CALL FIRST.				
CAN HAV	E VASE MOUNTED ON S	LANT OR I	MONUMEN	IT BASE.						
FOUNDA	TION FEE:									
Formula f	or install: (ex: 24x12x4) (Le	ength) 24 x	\$16.50 = \$	396.00						
LENGTH	X's \$16.50 = Foundation F	EE								
SINGLE (GRAVE MAX WIDTH IS 36	" - UNLES	S TWO SID	E-BY-SIDE LC	TS MAX LENGTH	I IS 72"				
NO BRON	NZE AND NO BENCHES A	LLOWED.								
	OF FULL BURIALS PER GRA	•	ESS IN DOL	JBLE DEPTH SE	CTION, THAN 2 AL	LOWED)				
#	OF CREMAINS PER GRAVE	: 3								
Installatio	on Fee Payable to:	Cash & Cl	<u>neck</u>			Spring delivery begins (date):				
WESTLA	WN CEMETERY					MARCH 15TH				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						NOVEMBER 15TH				

WHITE CHAPEL

Address	621 WEST LONG LAKE	RD.				Form Required: FORM		Yes	Χ	No	
City	TROY	State	MI	Zip	48098	Grave Location Required on	Memorial:	Yes		No	Х
Phone	(248) 362-7670					Symbol Required on Memori	al:	Yes		No	Х
Fax	(248) 688-9442					If yes, what symbol?				1	
Email						Benches Permitted:		Yes		No	Х
Contact	JOHN OHNSTAD GRAVE LOCATION OR SIDES	Phone VERIFICATI	(248) 817 ON FAX (248			Borders Required on Founda	ition:	Yes		No	Х
		Rules	& Regulat	tions - Installa	tion Fee - Colored	d Cameos Allowed					
BRONZE	ONLY. VASES ALLOW	ED. GRAN	NITE BASE	NOT REQUIR	ED, BUT MUST BI	E SUNRISE PINK WITH					
SAWN SI	DES IF ORDERED. ALL O	ORDERS N	IEED PRIO	R APPROVAL	BY CEMETERY.						
2 MARKE	RS ALLOWED ON ONE 1	GRAVE.	ONE AT HE	EAD AND ONE	AT FOOT.						
WITHOUT	GRANITE BASE			WITH GRAN	ITE BASE		BABY MA	RKER			
16"x 24" -	\$622.00 W/O VASE			16"x 24" - \$7	45.00 W/O VASE		(NO GRAI	NITE B	ASE)		
16"x 24" -	\$633.00 W/ VASE			16"x 24" - \$76	60.00 W/ VASE		20"x 10" -	\$331.0	0 W/O	VASE	Ē
24"x 12" -	\$432.00 W/O VASE (SAM	E W/VASE)		24"x 12" - \$52	27.00 W/O VASE		9"x 18" - \$	262.00	W/O Y	VASE	
24"x 14" -	\$489.00 W/O VASE			24"x 14" - \$60	06.00 W/O VASE						
24"x 14" -	\$500.00 W/ VASE			24"x 14" - \$6°	18.00 W/ VASE		TEXAS PE	ARL			
44"x 13" -	\$797.00 W/O VASE			44"x 13" - \$96	68.00 W/O VASE		24"x 13" - 24"x 13" -	 \$480 V	// VASE	_	
44"x 13" -	\$807.00 W/ VASE			44"x 13" - \$99	90.00 W/ VASE		24"x 13" -	\$468 V	//O VA:	SE	
44"x 14" -	\$845.00 W/O VASE			44"x 14" - \$1,	,027.00 W/O VASE	≣					
44"x 14" -	\$855.00 W/ VASE			44"x 14" - \$1,	,050.00 W/ VASE						
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # O	F CREMAIN	IS PER GRAVE:	2 OR 1 FULL AND 1	I CREMATION PER GRAVE					
					 						

Installation Fee Payable to:	
WHITE CHAPEL CEMETERY	
(SAME ADDRESS AS ABOVE)	
https://www.whitechapelcemetery.com/	

Spring delivery begins (date):
MARCH 15TH
Fall/Winter Delivery "cutoff" (date):
DECEMBER 1ST OR WEATHER PERMITTING
DECEMBER 131 OR WEATHER PERMITTING

WHITE LAKE

P.O. BOX 112

HIGHLAND, MI 48357

										_		
Address	6190 WHITE LAKE RD.					Form Required:		Yes		No	Х	
City	WHITE LAKE TOWNSHIF State	MI	Zip	48383		Grave Location Requi	ed on Memoria	ıl: Yes		No	Χ	
Phone	(248) 887-6700					Symbol Required on M	1emorial:	Yes		No	Χ	
Fax	(248) 887-4487					If yes, what symbol?				_		
Email						Benches Permitted:	Call contact	Yes		No		
Contact	MIKE WILLENBERG Ph	one (248) 8	387-6700			Borders Required on F	oundation:	Yes	Х	No		
НСМ	HURON CEMETERY MAINTENA	ANCE				2" bord	der on all sides					
GOVERN FLUSH SI	FLUSH GRANITE, SLANTS, ANI MENT ISSUED MARKERS - ALL ETTING OF GRANITE & BRONZE , MINIMUM \$175.00	VE		SUBMI	ITS MUS ITTED FO SHIP SEX	OR						
•	TION FEE FOR MONUMENTS &	BRONZE O	N CONCRE	TE (NON VA)						•		
\$0.75 PSI	OF FOUNDATION, MINIMUM \$2	:50.00		.								
ALL FOU	NDATIONS MUST BE 2" LARGER	R ON ALL S	IDES THAN	I MONUMENT	BASE.							
ADD 4" T0	D LENGTH AND WIDTH OF BAS	E TO DETE	RMINE FO	UNDATION SIZ	ZE NEEDE	D.						
ADD \$50.	00 FOR BUILT IN VASE											
MISCELL	ANEOUS ITEMS											
CORNER	MARKERS (SET OF 4)\$125.0	00										
VASE ON	LY\$100	0.00 (ADD \$	50.00 FOR	ALL FEES FOR	R BUILT IN	VASE)						
Notes: #	OF FULL BURIALS PER GRAVE	: 1 # OF CF	REMATION	BURIALS PER	GRAVE:	2-4						
(C	ALL MIKE @ HURON CEMETER	Y MAINTEN	NANCE FIRS	ST)								
											,	
Installatio	on Fee Payable to:					Spring delivery begir	ns (date):					
HURON CEMETERY MAINTENANCE						WEATHER PERMITTING						

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

WHITMORE LAKEVIEW

Address	NINE MILE ROAD AND E	AST SHO	RE DRIVE			Form Required:	Yes		No	Χ		
City	WHITMORE LAKE	State	MI	Zip	48189	Grave Location Required on Memorial:	Yes	Х	No			
Phone	(810) 231-1333					Symbol Required on Memorial:	Yes		No	Х		
Fax	(810) 231-5080					If yes, what symbol?						
Email	CLERK@GREENOAKTW	/P.COM				Benches Permitted:	Yes	Х	No			
Contact	GREEN OAK CHARTER	Phone	(810) 231-	1333		Borders Required on Foundation:	Yes	Х	No			
	TOWNSHIP CLERKS DEP	1.				2" border required				Ī		
			Rul	es & Regulat	ions - Installation	Fee						
FOUNDA	TION FEE:											
24"x 12" -	\$195.00	28" X 16"	- \$200.00									
36"x 12" -	\$290.00	40" X 16"	- \$300.00									
48"x 12" -	\$390.00	48" X 16"	- \$400.00									
CREMAT	ION BURIAL VAULT - \$27	5.00										
ODD SIZE	ED FOUNDATIONS USE .6	60 PSI.										
**CALL C	LERKS OFFICE BEFORE	DELIVERY	SO GRAVE	E CAN BE STA	AKED							
Notes: #	OF FULL BURIALS PER GRA	AVE 1 # O	F CREMAINS	PER GRAVE:	2 OR 1 FULL AND	CREMATION PER GRAVE						
r										1		
Installatio	on Fee Payable to:					Spring delivery begins (date):						
GREEN C	OAK CHARTER TOWNSHI	Р			WEATHER PERMITTING							
10001 SIL	VER LAKE RD.					Fall/Winter Delivery "cutoff" (date):						
BRIGHTO	N, MI 48116					WEATHER PERMITTING						

<u>WIXOM</u>

P.O. BOX 112

HIGHLAND, MI 48357

										-		
Address	NW CORNER OF NORTH V	VIXOM AND	W. MAPI	E RD.		Form Required:		Yes		No	Х	
City	WIXOM	State	MI	Zip		Grave Location Requir	ed on Memorial:	Yes		No	Χ	
Phone	(248) 887-6700					Symbol Required on M	1emorial:	Yes		No	Χ	
Fax	(248) 887-4487					If yes, what symbol?				_		
Email						Benches Permitted:	Call contact	Yes		No		
Contact	MIKE WILLENBERG		e (248) 8	37-6700		Borders Required on F	oundation:	Yes	Χ	No		
НСМ	HURON CEMETERY MA	INTENAN	CE			2" border on all sides						
	Rules & Regulations - Installation Fee											
BRONZE, FLUSH GRANITE, SLANTS, AND MONUMENTS - 36" MAX PER GRAVE												
GOVERN	MENT ISSUED MARKERS			ANNA - CLI	ERK OF	FFICE						
FLUSH SI	ETTING OF GRANITE & E			248-624-4	557							
\$0.50 PSI	\$0.50 PSI, MINIMUM \$175.00											
FOUNDA ⁻	TION FEE FOR MONUME	NTS & BR	ONZE ON	N CONCRETE (NON VA)	<u>.</u>							
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00									
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SII	DES THAN MONUMENT	BASE.							
ADD 4" To	O LENGTH AND WIDTH (OF BASE T	O DETER	RMINE FOUNDATION SI	ZE NEEDE	ED.						
ADD \$50.	00 FOR BUILT IN VASE											
MISCELL	ANEOUS ITEMS											
CORNER	MARKERS (SET OF 4)	\$125.00										
VASE ON	LY	\$100.00) (ADD \$5	0.00 FOR ALL FEES FC	R BUILT II	N VASE)						
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CR	EMATION BURIALS PER	R GRAVE:	2						
(C	ALL MIKE @ HURON CE	METERY M	IAINTEN	ANCE FIRST)								
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begin	ns (date):					
HURON C	EMETERY MAINTENANO	CE <u>CC V</u>		WEATHER PERMITTING								

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

WOODLAWN

Address	19975 WOODWARD AVE					Form Required: FORM		Yes	X	No	
City	DETROIT	State	MI	Zip	48203	Grave Location Required of	on Memorial:	Yes		No	Χ
Phone	(313) 368-0010					Symbol Required on Memo	orial:	Yes		No	Χ
Fax	(313) 368-5174					If yes, what symbol?					
Email	TMAXWELL@WOODLAW	VNMI.COM	<u>l</u>			Benches Permitted:	Call first	Yes	Х	No	
Contact	RON	Phone	(586) 558	3-7863		Borders Required on Foun	dation:	Yes	Х	No	
MMG	(GROUNDS SUPERINTE	NDENT)				2" border on all sides					
			Ru	ıles & Regulati	ons - Installation	Fee					
GRANITE, BRONZE AND MONUMENTS IN DESIGNATED AREAS. NO BRONZE VASES ALLOWED.											
SECTION	SECTIONS 29, 33, 37 AND front of 34 are bronze only. Bronze must have granite base.										
ANY COL	ANY COLOR GRANITE BRONZE BASE IS ALLOWED. BENCHES OR UPRIGHTS NEED PRIOR APPROVAL,										
ARE REQ	UIRED TO GO ON MONU	MENT EAS	SEMENT, A	AND IS ADDITIO	ONAL \$ 500.00 UN	LESS PURCHASED					
THRU CE	METERY, THEN WAIVED										
NO SLAN	TS ALLOWED										
	FEES:										
	Flagging Fee:	\$175.00 P	ayable to \	Woodlalwn Cen	netery						
	Setting Fee:	\$1.00 PSI	payable to	Inch Memorial	S						
	Foundation Fee:	\$1.00 PSI	Payable to	o Woodlawn Ce	metery						
MONUME	INT, BENCHES AND LEDO	SERS \$1.00) PSI								
MEMORIA	AL REMOVAL FEE: \$75.00)									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAIN	S PER GRAVE: 2	2 OR 1 FULL AND 1	CREMATION PER GRAVE					
Installatio	on Fee Payable to:					Spring delivery begins (d	late):				
WOODLA	WN CEMETERY					WEATHER PERMITTING					
(SAME AD	DDRESS AS ABOVE)					Fall/Winter Delivery "cuto	off" (date):				

WEATHER PERMITTING ON GROUND FROZEN

WOODMERE

(SAME ADDRESS AS ABOVE)

									_	
Address	9400 W. FORT STREET	-				Form Required: FORM	Yes	Х	No	
City	DETROIT	State	MI	Zip	48209	Grave Location Required on Memoria	: Yes		No	Х
Phone	(313) 841-0188					Symbol Required on Memorial:	Yes		No	Х
Fax	(313) 841-3134					If yes, what symbol?			_	
Email	jdobr@everstorypartners	.com				Benches Permitted: See note below	Yes	Х	No	
		Phone	(313) 8	41-0188		Borders Required on Foundation:	Yes		No	Х
MMG	Contact Joan Dobryden					2" border on all sides				
				Rules & Rec	gulations - Installa	ition Fee				
GRANIT	E AND BRONZE ONLY. B	RONZE MI	JST HAV	E GRANITE	BASE. NO BRON	ZE VASES.				
ANY CO	LOR OF GRANITE BRONZ	ZE BASES	ALLOWE	D. MONUMI	ENTS IN DESIGNA	ATED AREAS ONLY				
	FEES:									
	Flagging Fee:	\$175.00	Payable t	o Woodmere	e Cemetery					
	Setting Fee:	\$1.00 PS	I payable	to Inch Men	norials					
	Foundation Fee:	\$1.00 PS	I Payable	to Woodme	ere Cemetery					
ALL SLA	NTS AND BENCHES REC	QUIRE A G	RANITE	BASE						
Ground S	Superintendent MR. ANDR	E ROCKS	(313) 482	2-0328						
GROUN	DS SUPERINTENDENT IS	TO BE NO	TIFIED F	PRIOR TO D	ELIVERY. Delivery	Hours 9AM-2PM				
3' BENC	HES PERMITTED ON ONI	SPACE.								
4' and La	arger BENCHES ALLOWE	O (IF MORE	SPACE	S HAVE BE	EN PURCHASED T	O FIT).				
Notes: 7	OF FULL BURIALS PER	GRAVE: 1	# OF C	REMAINS PE	ER GRAVE: 2					
T										
Installat	ion Fee Payable to:					Spring delivery begins (date):				
WOODM	IERE CEMETERY					APRIL 1ST OR WEATHER PERMITT	ING			

Fall/Winter Delivery "cutoff" (date):

NO CUTOFF

WORDEN - SALEM

Address	5 MILE & PONTIAC TRAI	L			Form Required: FORM	Yes	X	No	
City	SALEM	State	MI	Zip	Grave Location Required on Memorial:	Yes		No	
Phone	(248) 437-5360				Symbol Required on Memorial:	Yes		No	
Fax					If yes, what symbol? *See Below	-			
Email	lilacridge@charter.net				Benches Permitted:	Yes		No	
Contact	STEVE ROBERTS	Phone	(248) 437-	5360	Borders Required on Foundation:	Yes		No	
			Rule	es & Regulations - Installation	Fee				
STEVE W	ILL PUT IN FOUNDATION	IS BUT PR	EFERS INC	H PUTS THEM IN.					
CONTACT	T STEVE TO SEE WHO H	E WANTS	TO PUT FO	UNDATION IN AND SEE IF GR	AVE IS FLAGGED.				
Notes:									
Installatio	n Fee Payable to:				Spring delivery begins (date):				
					Fall/Winter Delivery "cutoff" (date):				

WORKMEN'S CIRCLE

									1				
Address	33550 GRATIOT AVENU	E				Form Required:	Yes		No	Χ			
City	CLINTON TWP.	State	MI	Zip	48035	Grave Location Required on Memorial:	Yes		No	Х			
Phone	N/A					Symbol Required on Memorial:	Yes		No	Χ			
Fax	N/A					If yes, what symbol? *See Below			-	1			
Email	tila@hebrewmemorial.org	l				Benches Permitted:	Yes		No	Χ			
Contact	Tila @ Hebrew Memorial	Phone	(248) 543	-1622		Borders Required on Foundation:	Yes	Х	No				
		Fax	(248) 543	-1626		2" border on all sides							
			Ru	les & Regulat	ions - Installatior	Fee							
WORKM/	WORKMAN'S CIRCLE IS MAINTAINED BY HEBREW MEMORIAL PARK CEMETERY.												
PLEASE	CALL FOR SECTION VER	IFICATION											
*HEBREV	WRITING OF NAME AN	D DATE O	F DEATH A	RE REQUIRE	D ON THE STON	≣.							
FOUNDA	TION FEE:												
SINGLE (GRAVE - \$250.00												
DOUBLE	GRAVE - \$500.00												
PERMIT I	S REQUIRED												
Notes: #	OF FULL BURIALS PER (GRAVE: 1	# OF CRE	MAINS PER G	SRAVE: 0								
Installation	on Fee Payable to:	CASH CH	ECK			Spring delivery begins (date):							
	MEMORIAL CHAPEL	CREDIT				WEATHER PERMITTING							
	REENFIELD					Fall/Winter Delivery "cutoff" (date):							
	K, MI 48237					WEATHER PERMITTING							

YERKES

					-	
Address	8 MILE ROAD	Form Required:	Yes		No	Х
City	NORTHVILLE CHARTER TWP State MI Zip	Grave Location Required on Memorial:	Yes		No	Х
Phone		Symbol Required on Memorial:	Yes		No	Χ
Fax		If yes, what symbol?			=	
Email		Benches Permitted:	Yes		No	
Contact	Phone	Borders Required on Foundation:	Yes	Х	No	
		2" border on all sides				
	Rules & Regulations - In	stallation Fee				
BRONZE	FLUSH GRANITE, SLANTS, AND MONUMENTS - 36" MAX PER GRA	AVE				
GOVERN	MENT ISSUED MARKERS - ALL TYPES\$250.00					
FLUSH S	ETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)					
ALL FOU	NDATIONS MUST BE 2" LARGER ON ALL SIDES THAN MONUMENT	BASE.				
ADD 4" T	O LENGTH AND WIDTH OF BASE TO DETERMINE FOUNDATION SIZ	ZE NEEDED.				
Notes: #	OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER	P GRAVE: 2				
Notes. #	OF FOLL BORNALOT ER GRAVE. F # OF GREWATION BORNALOT ER	CONAVE. 2				
Installatio	on Fee Payable to: <u>CASH, CHECK</u>	Spring delivery begins (date):				
	CC VIA PHONE	WEATHER PERMITTING				
	<u> </u>	Fall/Winter Delivery "cutoff" (date):				
		WEATHER PERMITTING				
ı		IVVEATHER PERIVITITING				