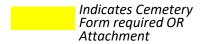
#### **CEMETERY INFORMATION**





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.

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

January 13, 2025

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	Х			
City	AUBURN HILLS	State	MI	Zip	48326	Grave Location Required on Memorial:	Yes	No	Х			
Phone	(248) 370-9402					Symbol Required on Memorial:	Yes	No	Χ			
Fax						If yes, what symbol?	<u></u>					
Email	cityclerk@auburnhills.org					Benches Permitted:	Yes	No	Х			
Contact	CITY CLERK (CITY OF AUBURN HILL	<b>Phone</b> S)	(248) 370-	9402		Borders Required on Foundation:	Yes	No	Х			
			Rul	es & Regulati	ons - Installation	Fee						
ANY STYLE OF MARKERS AND MONUMENTS ALLOWED. CALL CLERKS OFFICE AT												
(248) 370	-9402 BEFORE DELIVERY	<i>(</i> .										
FOUNDA	TION FEE:											
24" - \$225	5.00											
36" - \$235	5.00											
48" - \$245	5.00											
OVER 48	' - \$255.00											
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CREM	MATION BURI	ALS PER GRAVE	: 2						
<u> </u>									1			
Installatio	on Fee Payable to:					Spring delivery begins (date):						
	AUBURN HILLS					WEATHER PERMITTING (CALL FIRST)						
1827 N. S	QUIRREL RD.					Fall/Winter Delivery "cutoff" (date):						
AUBURN	HILLS, MI 48326					WEATHER PERMITTING (CALL FIRST)						

# ACACIA PARK

Address	31300 SOUTHFIELD RO	AD				Form Required: MSLIA FORM	Yes	X	No	
City	BEVERLY HILLS	State	MI	Zip	48025	Grave Location Required on Memorial	: Yes		No	Χ
Phone	(248) 646-4228					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 646-8348					If yes, what symbol?			_	
Email	icarruthers@acaciaparkm	ni.com				Benches Permitted:	Yes	Х	No	
	ISKA CARRUTHERS  / Partners	Phone https://w	` ,	46-4228 aparkceme	terymichigan.com	Borders Required on Foundation:	Yes		No	X
				Rules & Ro	egulations - Installat	on Fee				
BRONZE,	, GRANITE AND MONUME	ENTS ALL	OWED (II	N DESIGN	ATED AREAS). <b>BRON</b>	IZE MUST BE MOUNTED ON GRANITE	PRIOR	TO D	ELIVEF	RY.
CAMEOS	ARE PERMITTED. FLUS	H MARKE	RS MUST	Γ HAVE ST	EEL CAMEOS.					
FLUSH N	O SMALLER THAN 30x12	2x4								
	SECOND MARKER ON (	GRAVE CA	N BE 24	x12x4 IF 30	0x12x4 IS ALREADY S	SET ON GRAVE POLISH	ED BOF	RDER		
	20x28x4 DOUBLE INTER	RNMENT A	ALLOWED	ON GRA	VΕ	NOT RE	QUIRE	D		
CEMETE	RY FEES: new pricing	g effective	10-7-24		MEMORIAL SUR	VEY LAYOUT INSPECTION ASSESSME	NT FEE	: (MSL	.IA):	
					COMPANION/ BE	NCH/ PRIVATE COLUMBARIA - \$1,499.0	0			
Foundati	on Fee: \$1.00 PSI Payab	le to Acad	cia Park		SINGLE/ BOULDE	ER/ CREMATION MEMORIAL - \$899.00				
	(in addition to	flagging f	ee)		VETERAN/ BABY	/ INFANT/ PET - \$499.00				
INCH ME	MORIALS SETTING FEE:	\$1.00 PS	I payable	to Inch Me	emorials					
MEMORIA	AL REMOVAL FEE - \$75.0	0								
Notes: # (	OF FULL BURIALS PER GRA	VE VARIES	S (PLEASE	E CALL). # (	OF CREMATION BURIA	LS PER GRAVE 2				
			`	,						
Installatio	on Fee Payable to:	(for orde	ers purcha	ased from		Spring delivery begins (date):				
	outside the cemete					MARCH 1ST				
						Fall/Winter Delivery "cutoff" (date):				
					OCTOBER 31ST					

#### ADAT SHALOM MEMORIAL PARK

Address	28500 W. 6 MILE ROAD					Form Required: FORM	Yes	Х	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	org				Benches Permitted:	Yes		No	Х			
Contact	DENISE GALLAGHER	Phone	(248) 851-	5100		Borders Required on Foundation:	Yes		No	Χ			
	Rules & Regulations - Installation Fee												
NO BRON	IZE OR MARBLE ALLOWE	D.											
FLUSH AN	ND BEVELS ALLOWED. S	SLANTS UF	P TO 18" TA	\LL									
MONUMENTS ALLOWED IN DESIGNATED AREAS PLEASE CALL FOR PRIOR APPROVAL.													
(Minimun	(Minimun of 8 contiguous spaces)												
NO BASE	<b>S</b> ON SLANTS.												
NAME ON	BACK OF MONUMENTS	OR SLANT	TS IS RECO	OMMENDED, E	BUT, NOT REQUI	RED							
FOUNDAT	ΓΙΟΝ FEE:												
SINGLE M	1ARKER - 24"x 12" \$300.00	O - NO CO	MPANIONS	}									
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>

LARRY SANBORN

CLINTON, MI 49236

3717 CLINTON MACON ROAD

Address	E. BEMIS RD.					Form Required:	Yes		No	Χ
City	YPSILANTI	State	MI	Zip	48197	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	LARRY SANBORN	Phone	(734) 36	8-7949		Borders Required on Foundation:	Yes		No	Χ
			R	ules & Regula	tions - Installatio	n Fee				
FOUNDA <sup>-</sup>	TION FEE:									
.65 PSI, M	IINIMUM \$180.00									
BRONZE,	FLUSH GRANITE, SLAN	ΓS, BEVEL	S, AND M	ONUMENTS						
34" MAXII	MUM FOR SINGLE									
MIN 4" TH	IICK GRANITE/MARBLE.	ALL MEMO	RIALS M	UST COMPLY	WITH THE CEME	TERY APPEAL,				
NON TRA	DIONAL MONUMENTS W	ILL NEED	TO BE AF	PPROVED BEF	ORE PLACEMEN	Т.				
THE CEN	METERY HAS A RIGHT TO	REMOVE	OR NOT	ACCEPT AN U	UNDESIRED MON	IUMENT)				
Notes: # (	OF FULL BURIALS PER GRA	VE: 1 # OI	- CREMAIN	NS PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:	CASH OR	CHECK (	ONLY		Spring delivery begins (date):				

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		
Rules & Regulations - Installation 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												
MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE THAN 7' IN HEIGHT, INCLUDING THE BASE.												
BASE MIN	NIMUM 10" WIDE & 8" IN F	HEIGHT. N	ONUMEN	Г МІМІМИМ ТН	HICKNESS OF 8",	MINIMUM HEIGHT						
OF 30", N	IINIMUM LENGTH OF 36"											
MONUME	NTS, BENCHES, AND CR	REMATION	MEMORIA	LS - \$800.00								
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 Fax	(734) 761-4572 (734) 663-2607					Symbol Required on Memorial:  If yes, what symbol?	Yes		No	Χ		
Email	arborcrestcemetery@gma	ail.com_				Benches Permitted: <b>Designated areas</b>	Yes	Х	No			
Contact	WALTER	Phone	(734) 761-	-4572		Borders Required on Foundation:	Yes		No	Х		
			Ru	les & Regulati	ons - Installation	Fee						
MUST HAVE GRANITE BASE UNDER BRONZE. BRONZE, FLUSH, SLANTS AND MONUMENTS ALLOWED.												
CALL FOR PRICING VERIFICATION AND REGULATIONS PER SECTION AS PRICES ARE REVIEWED												
THROUGHOUT THE YEAR. ANY COLOR GRANITE BRONZE BASE IS ALLOWED.												
FOUNDA	TION FEE:											
SINGLE \$	575.00 - CONFIRM WITH	CEMETER	Υ									
COMPAN	ION UP TO 48"x 18" \$1,00	0.00 - CON	IFIRM WIT	H CEMETERY								
CALL CE	METERY FOR LARGER M	ARKERS										
Notes: #	OF FULL BURIALS PER G	RAVE: 2	# OF CREN	MATION BURIA	LS PER GRAVE:	NO LIMIT (CALL FIRST)						
	on Fee Payable to:	Cash, Ch				Spring delivery begins (date):						
	REST MEMORIAL PARK	CC VIA	<u>Phone</u>			YEAR ROUND (CALL FIRST)						
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):						

YEAR ROUND (CALL FIRST)

# ARGENTINE TOWNSHIP

									1	-	
Address	(ON SILVER LAKE RD.) 1/2	MILE E OF	ARGENTIN	E 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?			1		
Email	argentineoffice@argentine	etownship.	<u>com</u>			Benches Permitted:	Yes	Х	No		
	JANE LEFLER SEXTON: NANCY HIEBER	Phone Phone	(810) 735 (989) 271			Borders Required on Foundation:	Yes		No	Х	
			Rı	ıles & Regula	tions - Installation	Fee					
FLUSH, \$	SLANTS, BEVELS & MONU	IMENTS									
FOUNDA	ATION FEE:										
.60 PSI, S	60 PSI, \$150.00 MINIMUM - Price includes the foundation and installation (as of 1-1-25)										
Price is c	Price is calculated by the size of the base meaurement of the monument.										
Notes: #	OF FULL BURIALS PER GRA	AVF: 1									
	# OF CREMATION BURIALS F		2 ∩R 1 F	ELILL AND 1 CR	EMATION PER GRA	VE					
	# OF ORCIVITATION BOTTINGED I	LIC GIOTAL		OLE AIND TOIL	LEW/THOIT EIT OIL	V L					
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, I	MI 48442					WEATHER PERMITTING					

# ASSUMPTION GROTTO

A 1.1	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	Х	
Phone	(313) 372-0762					Symbol Required on Memorial:	Yes	Х	No		
Fax	(313) 372-2064					If yes, what symbol? Cross			1		
Email	grottorectory@ameritech.	<u>net</u>				Benches Permitted:	Yes		No	Х	
Contact	RACHAEL FLORA	Phone	(313) 372-	0762		Borders Required on Foundation:	Yes		No	Χ	
			Rul	es & 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	SINGLE FLAT 24"x 12"x 4" \$250.00 - max allowed on a single grave 24"										
COMPANION & SLANTS \$350.00 (EACH TIME SET) IF NECESSARY TO REMOVE											
CONTANION & SEATTO \$550.00 (EACIT TIME SET) II NECESSANT TO NEIMOVE											
PRIOR TO	D DELIVERY:										
	 CTORY @ 313-373-0762 (	OR EMAIL	arottorecto	orv@ameritec	h.net AND ADVIS	E NAME ON STONE					
				.,							
Nata: "3	NE ELILL DUDIAL O DED 00.4	VE: 4 " 05	005144710	N DUDIAL O DE	D ODAVE 4 (C)	/ 4 OTONE DED ODAY (E)					
Notes: # (	OF FULL BURIALS PER GRA	ve: 1 # OF	CREMATIO	N BURIALS PE	K GRAVE: 4 - (ONL	Y 1 STONE PER GRAVE)					
In a to Place	Face Described					Ourte of Islands Islands					
	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**

									_		
Address	ROSE CENTER & FISH L	AKE ROA	DS			Form Required:	Yes		No	Х	
City	HOLLY	State	MI	Zip	48442	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) 695- (810) 735-			Borders Required on Foundation:	Yes		No	Χ	
			Ru	les & Regulat	ions - Installatior	ı Fee					
FLUSH, S	SLANTS, BEVELS & MONU	JMENTS									
						SEXTON:					
FOUNDA	TION FEE:					Tim Hohn					
.60 PSI, \$	3150.00 MINIMUM - Price ir	ncludes the	foundation	and installatio	n <b>(as of 1-1-25)</b>	Genesee Valley V 810-695-5166	ault				
Price is calculated by the size of the base meaurement of the monument.											
Notoc: #	OF FULL BURIALS PER GRA	۸۱/⊏. 1									
			- 0 00 4 5		EMATION DED OD	. VE					
7	FOF CREMATION BURIALS	PER GRAVI	: 2 UR 1 F	ULL AND T CRI	EMATION PER GRA	AVE					
Installation	on Fee Payable to:	CASH/CHE	CK			Spring delivery begins (date):					
	E VALLEY VAULT	& CC VIA				WEATHER PERMITTING					
10510 N.	HOLLY RD.					Fall/Winter Delivery "cutoff" (date):					
HOLLY, N	Л 48442					WEATHER PERMITTING					

#### **BELLEVILLE (HILLSIDE CEMETERY)**

BELLEVILLE, MI 48111

A 1.1	40705 DENTON DC 4 D					Free Day 1st L. FORM	V.	V	N		
Address						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	Χ	
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		No	Χ	
			Rı	ules & Regulat	ions - Installatior	n Fee					
FLUSH, BEVELS, SLANTS AND MONUMENTS											
34" MAX	FOR SINGLE										
FOUNDA	TION FEE: 1.00 PSI										
	_										
Cash, Che	eck and Credit Card in offic	e									
2019 last	fall foundation order on F	Friday, Au	gust 23rd								
Notes: #	OF FULL BURIALS PER (	GRAVE 1#	FOF CRE	MATION BURIA	ALS PER GRAVE:	: 4					
Installation	on Fee Payable to:					Spring delivery begins (date):					
CITY OF	BELLEVILLE - ATTN: BRIA	NA HOOT	MAN			WEATHER PERMITTING Usually May	or Jun	e			
6 MAIN S	TREET					Fall/Winter Delivery "cutoff" (date):					

WEATHER PERMITTING

### BETH EL MEMORIAL PARK

Address	28120 SIX MILE					Form Required:	Yes	No	Х
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 & Regulati	ions - Installation	Fee			
SINGLE (	GRANITE FLUSH MARKER	S ONLY -	24"x 12"x 4	<b>!</b> "					
NO SYME	BOLS CONTRARY TO JEW	ISH RELIG	GIOUS BEL	LIEFS.					
INSTALL/	ATION FEE: \$350.00					Cemetery will accept credit card paywith a 3% fee.	ments		
						Debit cards are accepted with no fee	s.		
						Accounting contact # 248-851-1100			
Notes: //	OF FULL BURDIAL C DED C	ND AN /E. 4	# OF ODE	MATION DUD	ALC DED ODAVE	4			
NOTES: #	OF FULL BURIALS PER G	KAVE: 1	# OF CRE	IVIATION BURI	ALS PER GRAVE	1			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
CEMETE	RY BOARD OF CONGREG	SATION 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	Χ
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	X No	
Contact	BRAD BOUCHIE	Phone	(734) 274	-7422		Borders Required on Foundation:	Yes	No	Х
			D.	ulos & Bogulot	tions Installation	) Foo			
				_	tions - Installation	i ree			
	, FLUSH GRANITE, SLAN	TS, BEVEL	S, AND MC	ONUMENTS					
	TION FEE:								
.65 PSI, N	/INIMUM \$200.00								
ALL BASE	ES FOR MONUMENTS MU	JST BE NO	LONGER	THAN 34" ON	A SINGLE GRAV	E			
https://bet	hlehem-ucc.org/cemeterylo	ocateagrav	<u>e/</u>						
Good for I	ooking up grave locations								
**ALL MA	RKERS ARE SUBJECT TO	O THE APP	PROVAL OI	R DENIAL OF	THE CEMETERY	BOARD.			
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1							
#	OF CREMATION BURIALS P	ER GRAVE	: 2 OR 1 FUI	LL AND 1 CREN	MATION PER GRAV	E			
Installatio	on Fee Payable to: CAS	H & CHEC	KS ONLY			Spring delivery begins (date):			_
BRAD BO	OUCHIE					WEATHER PERMITTING			
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):			
CLINTON	, MI 49236					OCTOBER 1ST			

### **B'NAI ISRAEL MEMORIAL GARDEN**

Address	43300 W. TWELVE MILE	RD.				Form Required: MSLIA FORM	Yes	Χ	No	
City	NOVI	State	MI	Zip	48377	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 349-2784					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 349-2826					If yes, what symbol?				
Email	mscharr@oaklandhillsmi.	<u>com</u>				Benches Permitted: Call for restrictions	Yes	Χ		
Contact	MELISSA SCHARR	Phone	(248) 34	9-2784		Borders Required on Foundation:	Yes	Χ	No	
Everstory	Partners					**Call for regulations	·			
			R	ules & Re	gulations - Installat	ion Fee				
BRONZE,	GRANITE AND MONUME	ENTS ALLO	OWED (IN	DESIGNA	TED AREAS). <b>BRO</b> I	NZE MUST BE MOUNTED ON GRANITE F	RIOR	TO DE	LIVER	Υ.
	ARE PERMITTED. FLUS									
BENCHES	S ARE ALLOWED.									
CEMETE	RY FEES: new pricing	ı effective	10-7-24		MEMORIAL SUR	VEY LAYOUT INSPECTION ASSESSMEN	T FEE	(MSLI	A):	
	arra ====	,				NCH/ PRIVATE COLUMBARIA - \$1,499.00		(	,	
Foundation	on Fee: \$1.00 PSI Payab	le to B'Na	i Israel			ER/ CREMATION MEMORIAL - \$899.00				
Canaan	(in addition to					/ INFANT/ PET - \$499.00				
INCH ME	MORIALS SETTING FEE:		•	o Inch Men		γ ((1) ((1) γ (1) γ (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				
INCIT WIL	WIONIALS SETTING FEE.	ψ1.00 F S	i payable t	o inchi wien	ionais					
No.	OF FULL DUDING OFF	0DAVE 4	" OF OD	FAATION	DUDIAL O DED OD	N/E 0				
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CR	EMATION	BURIALS PER GRA	AVE: 3				
Farmalet!	on Foe Develop to	/famar-1-		a d fuana		Coming delivery begins (deta):				
roundatio	on Fee Payable to:	•	rs purchas		ct. 7, 2024)	Spring delivery begins (date):				
		0 0.10.30		, ss. <b>-</b> .	,,	WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING - CALL BY N	OV. 15	TH		

# BOTSFORD

CLINTON, MI 49236

									_	
Address	476 EARHART RD.					Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip	48105	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	FORESTHILL_CEM@S	<u>BCGLOBAL</u>	<u>NET</u>			Benches Permitted:	Yes	Х	No	
Contact	BRAD BOUCHIE	Phone	(734) 2	274-7422		Borders Required on Foundation:	Yes		No	Х
				Rules & Reg	ulations - Installa	tion Fee				
FOUNDA	TION FEE:									
.65 PSI, N	11NIMUM \$200.00									
BRONZE,	FLUSH GRANITE, SLAN	NTS, BEVEL	_S, AND	MONUMENT	S					
ALL BASE	ES FOR MONUMENTS M	IUST BE NO	D LONG	ER THAN 34"	ON A SINGLE GR	AVE				
MIN 4" TH	IICK GRANITE/MARBLE	. ALL MEMO	ORIALS	MUST COMP	LY WITH THE CE	METERY APPEAL,				
NON TRA	DIONAL MONUMENTS	WILL NEED	TO BE	APPROVED E	BEFORE PLACEM	ENT.				
(THE CEN	METERY HAS A RIGHT	TO REMOV	E OR NO	OT ACCEPT A	AN UNDESIRED M	ONUMENT)				
Notes: # 0	OF FULL BURIALS PER GR	RAVE: 1 # O	F CREM	AINS PER GRA	VE: 2 OR 1 FULL AN	ND 1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:	CASH OR	CHECK	CONLY		Spring delivery begins (date):				
BRAD BO	UCHIE					WEATHER PERMITTING				
4651 KEH	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				

OCTOBER 1ST

### **BRIGHTON HILLS**

200 NORTH FIRST ST.

BRIGHTON, MI 48116

							-			
Address	1001 FLINT RD.					Form Required:	Yes		No	Х
City	BRIGHTON	State	MI	Zip	48116	Grave Location Required on Memorial	: Yes		No	Х
Phone	(810) 227-0463					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 227-6420					If yes, what symbol?			-	
Email	brownt@brightoncity.org					Benches Permitted Only with	Yes	Χ	No	
Contact	TARA BROWN	Phone	(810) 227-	-0463		Sexton's Permission	_		-	
						2" Borders Required on Foundation	: Yes	Χ	No	
			Ru	les & Regulat	ions - Installatior	ı Fee				
2" BORD	ER REQUIRED FOR ALL	MONUMEN	NTS, ELEV	ATED MARKE	RS, AND BRONZI	E MARKERS (EXCEPT GOVERNMENT	). <b>NO E</b>	XCEP	TIONS	3!
A LARGE	R FOUNDATION CAN BE	PLACED II	F THE SPA	CE PERMITS.	EACH PLOT IS 4	44" WIDE IF MEMORIAL IS TO BE LA	RGER, A	N AD	OITIO	NAL
PLOT NE	EDS TO BE PURCHASED	. INSTALL	FEE FOR	FOUNDATION	NS NOT LISTED,	SEE NOTE IN BLUE BELOW.				
FOUNDA <sup>*</sup>	TIONS ARE INSTALLED A	MINIMUM	OF 90 DA	YS AFTER INT	TERNMENT.					
SECTION	I 11 IS FLUSH ONLY. GOV	ERNMEN	ΓMARKER	INSTALLATIC	NS - \$100.00					
	CONCRETE F	OUNDATI	ON SIZES			FLUSH MONUMENT INSTALLATION	I FEES			
24"x 12" -	II U SIZE IS	52"x 18" -	•			16"x 8" - \$75.00	REMAINS	AND		
28"x 16" -	manufathand Abank ta	58"x 18" -	\$177.00			24"x 12" - \$85.00	OLUMBA	RIUM		
36"x 16" -		60"x 16" -	\$181.00			36"x 12" - \$95.00	LAQUES =	= \$65.0	00	
40"x 16" -		66"x 18" -	\$183.00			42"x 12", 48"x 12"- \$110.00				
42"x 16" -	\$156.00 cheaper than a	72"x 18" -	\$190.00			54"x 12" - \$115.00				
42"x 18" -	\$160.00 custom foundation)	80"x 20" -	\$198.00							
48"x 22" -	\$173.00	98"x 16" -	\$210.00							
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	S PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	BRIGHTON					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	E			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 SI	ETTING OF GRANITE & B	RONZE OI	N GRANITE	(NO FOUNDATION)							
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON C	CONCRETE (NON VA)							
\$0.70 PSI	OF FOUNDATION, MINIM	IUM \$250.(	00								
ALL FOU	NDATIONS MUST BE 2" LA	ARGER ON	N ALL SIDE	S THAN MONUMENT E	BASE.						
ADD 4" To	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)					
	OF FULL BURIALS PER G										
(C	ALL MIKE @ HURON CEM	/IETERY M	AINTENAN	CE FIRST)							
ì				·							
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begin	s (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

# **BROOKSIDE**

									_	
Address	501 N. UNION ST.					Form Required:	Yes		No	Χ
City	TECUMSEH	State	MI	Zip	49286	Grave Location Required on Memorial:	Yes		No	Х
Phone	(517) 423-3632					Symbol Required on Memorial:	Yes		No	Х
Fax	N/A					If yes, what symbol?			7	
Email	troberts@tecumseh.mi.us	<u>i</u>				Benches Permitted: See note below	Yes	Х	No	
Contact	TRACEY ROBERTS	Phone	(517) 403	-2239		Borders Required on Foundation:	Yes	Х	No	
						2" border on all sides				
			Ru	iles & Regulati	ions - Installatior	Fee				
FLUSH, E	EVELS, SLANTS, MONUN	MENTS								
FOUNDA	TION FEE: .90 PSI - MINII	MUM \$180	.00 - PRE-F	POURS 24"x 12	2"					
NO	TE: Foundation Fee calcula	ation MUST	Γ include th	e 2" border on	all sides in the fou	ndation size.				
* BENCHI	ES PERMITTED WITH PEI	RMISSION	& ACCESS	SARII ITY						
	a grave has an existing ma				henches are no l	onger allowed				
NOTE. II	a grave has an existing ma	ikei oi iiioi	nument, au	ditional outside	beliches are no k	onger anowed.				
Notoo: #		D A \ / E . 4	# OF ORE	MATION DUDI	ALC DED ODAVE	. 2				
Notes: #	OF FULL BURIALS PER O	SKAVE. I	# OF CRE	IVIA I ION BURI	ALS PER GRAVE	. 2				
Installatio	on Fee Payable to:	ash & Che	cks			Spring delivery begins (date):				
CITY OF	TECUMSEH					WEATHER PERMITTING				
P.O. BOX	396					Fall/Winter Delivery "cutoff" (date):				
TECUMS	EH, MI 49286					SEPTEMBER 20TH				

# CADILLAC MEMORIAL - EAST

							_			
Address	38425 GARFIELD					Form Required: MSLIA FORM	Yes	Χ	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	Χ	No	
Contact Everstory	LARRY MARCATH & LINDA / Partners	C. (marker des	Phone k)	(586) 286-	7500	Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regu	ılations - Ins	allation Fee				
BRONZE	ONLY. MUST BE ON GR	ANITE BA	SE AND M	UST HAVE	SAWN SIDE	S, AND CALCULATE THE				
FOUNDA	TION FEE ON THE SIZE O	F THE BA	SE. ANY	COLOR GR	ANITE BRO	NZE BASE IS ALLOWED.				
CEMETE	RY FEES: new pricing	effective	10-7-24		MEMORIAL	SURVEY LAYOUT INSPECTION ASSESSMEN	T FEE (	(MSL	IA):	
					COMPANIO	N/ BENCH/ PRIVATE COLUMBARIA - \$1,499.00	ı			
Foundati	on Fee: \$1.00 PSI Payab	le to Cadil	lac Memor	rial-East	SINGLE/ BO	ULDER/ CREMATION MEMORIAL - \$899.00				
	(in addition to f	lagging fe	e)		VETERAN/ E	BABY/ INFANT/ PET - \$499.00				
INCH ME	MORIALS SETTING FEE:	\$1.00 PSI	payable to	Inch Memo	orials					
BENCHE	S MUST HAVE GRANITE E	BASE.								
MEMORIA	AL REMOVAL FEE - \$75.0	)								
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CREM	MATION BL	JRIALS PER (	GRAVE: 2 IF NO FULL BURIAL				
0	R 1 FULL AND 1 CREMAII	NS PER GI	RAVE							
Installatio	on Fee Payable to:				s	pring delivery begins (date):				
					W	EATHER PERMITTING				
					F	all/Winter Delivery "cutoff" (date):				
					l w	EATHER PERMITTING - CALL FIRST				

# CADILLAC MEMORIAL - WEST

Address	34224 FORD ROAD					Form Required: MSLIA 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	mmcna1@everstorypartn	ers.com				Benches Permitted:	Yes	Х	No	
	MARY - marker desk	Phone	(734) 721-	7161		Borders Required on Foundation:	Yes		No	Χ
Everstory	/ Partners									
			Rul	es & Regul	ations - Installatio	n Fee				
BRONZE	ONLY. MUST BE ON GR	ANITE BA	SE. ANY C	OLOR GRA	<mark>NITE BRONZE BA</mark>	SE IS ALLOWED.				
MONUME	NTS IN DESIGNATED AF	REAS ONL'	Y - CONTAC	CT CEMETE	ERY FOR DETAILS					
CEMETE	RY FEES: new pricing	effective	10-7-24	ļ	MEMORIAL SURVI	EY LAYOUT INSPECTION ASSESSMEN	IT FEE	(MSLI	A):	
				(	COMPANION/ BEN	CH/ PRIVATE COLUMBARIA - \$1,499.0	0			
Foundati	on Fee: \$1.00 PSI Payab	le to Cadil	lac Memori	al-West	SINGLE/ BOULDEF	R/ CREMATION MEMORIAL - \$899.00				
	(in addition to f	lagging fe	e)	•	VETERAN/ BABY/ I	NFANT/ PET - \$499.00				
INCH ME	MORIALS SETTING FEE:		•			·				
		ψσσ <b>σ</b> .	payable to							
BENCHE	S MUST HAVE GRANITE I	BASE								
SECOND	RIGHTS (LOCATION MUS	ST BE APP	ROVED)							
Notes: # C	F FULL BURIALS PER GRA	VE: 1 # OF	CREMATION	N BURIALS F	PER GRAVE: 2					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	•					WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				
						VVLATHER FERIVITITING				

#### **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	X	No	
City	KAWKAWLIN	State	MI	Zip	48631	<b>Grave Location Require</b>	d on Memorial:	Yes	Х	No	
Phone	(989) 684-0666					Symbol Required on M	emorial:	Yes	Х	No	
Fax	(989) 684-8565					If yes, what symbol?	Religious				
Email						Benches Permitted:	See below	Yes	Х	No	
Contact	CLERK IN OFFICE	Phone	(989) 684	-0666		Borders Required on F	oundation:	Yes		No	Х
			Ru	les & Regulat	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 ENI	O CENTERI	ED OVER 3	OR MORE GR	RAVES COUNTS	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	RY								
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	135 N. MAIN ST.					Form Required:	Yes		No	Х
City	MUSSEY TWP	State	MI	Zip	48014	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 395-4915					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 395-7182					If yes, what symbol?				
Email	admin@musseytownship	o.org				Benches Permitted:	Yes	Х	No	
	JERRY PEWINSKI	Phone	(810) 614			Borders Required on Foundation:	Yes	Х	No	
or MUSS	EY TWP - Ph: (810) 395-4	l915 Fx: (8	10) 395-71	82		2" border all around (Included in size &	& charg	ed for)		
			Ru	ıles & Regulat	ions - Installation	Fee				
CALL TO\	VNSHIP FOR REGULATI	ONS & SIZ	ES ALLOW	/ED.						
FOUNDA <sup>*</sup>	ΓΙΟΝ FEE: .75 PSI.									
JERRY P	EWINSKI (SEXTON)									
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BURI	ALS PER GRAVE:	2				
0	R 1 FULL AND 1 CREMA	TION PER (	GRAVE							
Installatio	n Fee Payable to:					Spring delivery begins (date):				
JERRY PI	EWINSKI					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	'EK				Form Required:	Yes		No	X
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	Χ
Email						Benches Permitted:	Yes	Х	No	
Contact	TREVOR MARQUARDT	Phone	(517) 3	321-3000		Borders Required on Foundation:	Yes		No	Х
				Rules & Reg	ulations - Installatio	n Fee				
BRONZE	ON GRANITE ONLY. VA	SES ALLO	WED. (	CALL FOR SE	PECIFIC SIZING.					
NO FLUS	H, BEVELS OR SLANTS A	ALLOWED.	UPRIG	HT MONUME	ENT SECTION.					
INFANT 1	10 x 20 ON 14 x 24 x 4 BAS	SE = \$99.00	0							
31" AND	BELOW = \$899.00									
32" AND	UP = \$1,599.00									
38" MAX	FOR SINGLE GRAVE									
ı										
ı										
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # C	F CREM	ATION BURIAL	LS PER GRAVE: 2					
(	OR 1 FULL AND 1 CREMATION	ON PER GR	AVE (CA	LL FOR PRIOF	R APPROVAL)					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	HILL MEMORIAL PARK					WEATHER PERMITTING				
(SAIVIE AI	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	Χ
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes	No	Х
Phone	(734) 461-1118 OR 1119					Symbol Required on Memorial:	Yes	No	Χ
Fax	N/A					If yes, what symbol?			
Email	jhinkle1@wowway.com					Benches Permitted:	Yes	No	Х
Contact	JACKSON HINKLE	Phone	(734) 4	61-1118		Borders Required on Foundation:	Yes	No	Χ
		0	r (734) 4						
			İ	Rules & Regu	lations - Installa	tion Fee			
BRONZE	AND FLUSH GRANITE MA	ARKERS C	NLY. NC	UPRIGHTS,	VASES OR BEN	CHES ALLOWED.			
BRONZE	MARKERS MUST HAVE G	RANITE E	BASE BE	FORE INSTAL	LATION. ANY C	COLOR GRANITE BRONZE			
BASE ALI	OWED. WAIVER MUST I	BE SIGNE	D FOR A	NY BRONZE I	MARKER.				
SINGLE N	MARKER - ONLY 1 NAME	ALLOWED	. PHOT	OS ETCHED (	ON MARKER ON	LY.			
NO FULL	LEDGERS ALLOWED. NO	UPRIGH	TS, VASI	ES OR BENCH	HES ALLOWED.				
NO VASE	S ALLOWED.								
FOUNDA <sup>*</sup>	<u>ΓΙΟΝ FEE:</u>								
INFANT N	MARKER UP TO 20"x 10" x	4" - \$405.	00						
24"x 12" x	4" - \$439.00 - NO TWO N	AMES ON	SINGLE	MARKERS - 2	2 MARKERS ON	1 GRAVE ALLOWED			
ADULT M	ARKERS FOR ALL SIZES	AFTER 24	"x 12" x	4" - \$1.65 PSI					
ALL SIZE	S after 24"x 12" x 4" - \$1.50	) PSI							
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMA	TION BURIALS	PER GRAVE: 1				
	OR 1 FULL AND 1 CREMATIC	N PER GR	AVE						
									1
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: CARLETON, MI 48117-9150

									1	
Address	RIDGE ROAD S. AT CH	ERRY HILL	. ROAD			Form Required:	Yes		No	Х
City	CANTON	State	MI	Zip	48187	**Grave Location Required on Memoria	al Yes		No	Х
Contact	ROBERT SIMMONS - Pr	esident of (	CHS Assoc	·		Symbol Required on Memorial:	Yes		No	Χ
Phone	(313) 562-7496					If yes, what symbol?				
Email	fairygarden@att.net					Benches Permitted:	Yes	Х	No	
Contact	ROBERT SIMMONS	Phone	` '	-7496 or (734)	612-5245	Borders Required on Foundation:	Yes	Х	No	
	SEXTON: KYLE PRICE	- Phone	(734) 301	-1141		2" border all around marker r	equired	d		
			Ru	iles & Regulat	tions - Installatio	on Fee				
NOTHING	OVER 5' HIGH.									
FOUNDA	TION FEE: .65 PSI									
**GRAVE	LOCATION ON MEMORI	AL SOMET	IMES HELI	PS.						
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MATION BUR	IALS PER GRAV	E: 2				
Installation	on Fee Payable to:	Method	of payment	is		Spring delivery begins (date):				
Payable:	KYLE PRICE	Cash Chec	k Credit Card	I		WEATHER PERMITTING				
Address:	6480 OAKVILLE-WALTZ	RD				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	Χ
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										
l										
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	Х
Fax	(586) 463-0931					If yes, what symbol?			
Email	sales@clintongrove.com					Benches Permitted: Call for restrictions	Yes X	No	
Contact	DAN STOKES TINA WUNDERLICH (Invo	Phone oicing)	(586) 463-0	0851		Borders Required on Foundation:	Yes	No	Χ
			Rul	les & Regulati	ions - Installation	Fee			
MONUME	ENTS ARE ALLOWED ON 4	4 GRAVE ι	LOTS. NEV	V VETERANS	SECTION HAS A	MERICAN MARBLE			
TABLETS	i.								
FOUNDA <sup>*</sup>	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 CAI	L CLINTO	N GROVE CEI	METERY FOR PR	ICE.			
LEDGER	- \$850.00								
Ĭ									
l									
Í									
Ĭ									
Notes: 1 F	FULL BURIAL PER GRAVE O	R 1 FULL A	ND 2 CREM	ATION BURIAL	S PER GRAVE				
Installatio	on Fee Payable to:	Cash, Che	:ck, &			Spring delivery begins (date):			
CLINTON	GROVE CEMETERY C	redit Card	VIA Phone	<del>;</del>		WEATHER PERMITTING			
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):			
ĺ						WEATHER PERMITTING			

#### **CLOVER HILL PARK**

Address	2425 E. FOURTEEN MILE	RD.				Form Required:	FORM	Yes	Χ	No	
City	BIRMINGHAM	State	MI	Zip	48009	Grave Location R	Required on Memorial:	Yes		No	Х
Phone	(248) 723-8884					Symbol Required	l on Memorial:	Yes		No	Х
Fax	(248) 723-8886					If yes, what sym	nbol?				
Email	kraznik@cloverhillpark.org	1				Benches Permitte	ed:	Yes	Χ	No	
Contact	KIMBERLY RAZNIK	Phone	(248) 723	-8884		Borders Required	d on Foundation:	Yes		No	Χ
			Ru	les & Regulati	ions - Installation	Fee					
MONUME	NTS MUST HAVE <b>(FAMIL</b>	Y NAME (		•			AMILY LOTS				
	ERMITTED ON BACK FOI										
	EQUIRED FOR DELIVER										
	EE ON <u>ALL ORDERS</u> - \$5			,	,						
SECTION	9 AND FIRST 3 ROWS SE	ECTION 30	IS BRONZ	ZE ONLY up to	Lot 35		MONUMENT CLEAN	IING E	EEQ		
GRANITE	MARKERS - \$450.00 + \$5	0.00 = \$50	0.00				FOOTSTONE / BEVE				
BRONZE I	MARKERS - \$450.00 + \$50	0.00 = <b>\$50</b>	0.00				SINGLE SLANT - \$20 MONUMENTS - CAL		ОПОТ	· <b>F</b>	
BENCHES	S: BENCH 48"x 14" - \$1,5	00.00 + \$5	0.00 = \$1,5	550.00			MONOMENTO OAL	LION	QUUI	_	
BABY - 8":	x 10" or 12", 10"x 16" = <b>\$50</b>	<b>0.00</b> NO F	DUNDATIO	N FEES FOR I	BABIES						
MONUME	NTS: <b>\$1,500.00 + \$50.00</b>	= \$1,550.0	O FOR MA	X 48"x 14", QU	OTED FOR LARG	SER SIZE					
FOUNDAT	TION REMOVAL - QUOTE	FOR MAR	KER / QUO	OTE FOR MON	IUMENT						
HEADSTC	NE LEVELING - NO CHAI	RGE									
MONUME	NT LEVELING - CALL CLO	OVER HILL	FOR PRICE	CING							
Notes: # 0	OF BURIALS PER GRAVE	: 1 # OF C	REMATIO	N BURIALS PE	R GRAVE: 1						

Installation Fee Payable to: CASH, CHECK

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	RCE RD.				Form Required:		Yes		No	Х
City	COMMERCE	State	MI	Zip		Grave Location Requi	red on Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on N	Memorial:	Yes		No	Х
Fax	(248) 887-4487					If yes, what symbol?				-	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG		(248) 887-	6700		Borders Required on I	Foundation:	Yes	Χ	No	
НСМ	HURON CEMETERY MA	INTENANC	E			2" borde	er on all sides				
			Rul	es & Regulations - In	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLANT	ΓS, AND M	ONUMENT	S - 36" MAX PER GRA	AVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$250	<u>).00</u>							
FLUSH S	ETTING OF GRANITE & B	RONZE OI	N GRANITE	(NO FOUNDATION)							
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA <sup>*</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON C	ONCRETE (NON VA)	_						
\$0.70 PSI	OF FOUNDATION, MINIM	1UM \$250.0	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 \$50.0	00 FOR ALL FEES FO	R BUILT II	N VASE)					
Notes: #	OF FULL BURIALS PER G	GRAVE: 1	# OF CREM	IATION BURIALS PER	R GRAVE:	2					
(C	ALL MIKE @ HURON CEN	ИETERY М	IAINTENAN	CE FIRST)							
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begin	ns (date):				
HURON C	CEMETERY MAINTENANC	E CC V	IA PHONE			WEATHER PERMITT	ING				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

### **COMMERCE MEMORIAL CEMETERY**

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

							r		7	
Address	2451 BENSTEIN ROAD					Form Required:	Yes		No	Χ
City	COMMERCE	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 MA	INTENANC	E			2" border on all sides				
			Rul	es & Regulations - Ins	stallation	Fee				
BRONZE,	FLUSH GRANITE, SLAN	ΓS, AND M	ONUMENTS	S - 36" MAX PER GRA	VE					
GOVERN	MENT ISSUED MARKERS	3 - ALL TYF	PES\$250	0.00						
FLUSH SI	ETTING OF GRANITE & B	RONZE OI	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON C	ONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MINIM	ИUM \$250.(	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER ON	N ALL SIDES	S THAN MONUMENT I	BASE.					
ADD 4" To	O LENGTH AND WIDTH C	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 \$50.0	00 FOR ALL FEES FOR	R BUILT IN	I VASE)				
	OF FULL BURIALS PER (									
(C	ALL MIKE @ HURON CEN	ЛETERY М	AINTENAN	CE FIRST)						
				,						
Installatio	on Fee Payable to:	CASH, CH	HECK		ſ	Spring delivery begins (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

### CRESCENT HILLS

(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	Х
Phone	(248) 618-7437					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 674-8658					If yes, what symbol?			_	
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								
			Ru	les & Regulation	ons - Installation	Fee				
FLUSH, G	GRANITE, BEVELS, SLANT	TS AND MO	ONUMENTS	S. SINGLE GR	AVE 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	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	N FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED E	BY A REPRESE	NTATIVE FROM	THE FAMILY AND SEXTON (TIM SIMM	IONS 2	248-80	4-0649	).
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 4	OR 1 FULL AND 1	I CREMATION PER GRAVE				
Installatio	on Fee Payable to: Check	s and Cas	h			Spring delivery begins (date):				
WATERF	ORD TOWNSHIP					WEATHER PERMITTING (PLEASE CA	ALL FIF	RST)		

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING (PLEASE CALL FIRST)

# CRESTWOOD MEMORIAL

A -1 -1	0000 54051111 5045					Farma Damidaada	V	V	<b>.</b>	
	2020 EAST HILL ROAD					Form Required:	Yes	X	No	
City	GRAND BLANC	State	MI	Zip	48439	Grave Location Required on Memorial:	Yes		No	X
Phone	(810) 694-4101					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 694-9481		5144W 00	00 I NITII   400 I		If yes, what symbol?			1	
Email	cfirman@covenantcemet	tery.com	EMAIL GO	OD UNTIL APRI	L 1, 2025	Benches Permitted: Designated areas	Yes	Х	No	
Contact	CATHY FIRMAN AT CRESTWOOD (ONL	<b>Phone</b> Y UNTIL AF	(810) 694 PRIL 1, 202			Borders Required on Foundation:	Yes		No	Х
		-	Ru	les & Regulati	ions - Installation	Fee				
NO BEVE	LS OR SLANTS ALLOWE	ED. GRANI	TE MUST E	BE FLUSH AND	SAWN SIDES.					
MINIMUM	I SIZE 24"x 14" WITH FLC	OWER VAS	E, CENTER	RED 1-1/2" FRC	OM TOP CENTER					
FOUNDA	TION FEE:									
\$20.00 PE	ER LINEAR INCH									
MONUME	ENTS IN DESIGNATED AF	REAS ONL'	<b>′</b>							
	OF FULL BURIALS PER GRA			ON BURIALS PE	R GRAVE: 2					
	OR 1 FULL AND 1 CREMATI	ON PER GR	AVE							
Installatio	on Fee Payable to: Checl	ks and Cas	h			Spring delivery begins (date):				
	OOD MEMORIAL CEMET		••			WEATHER PERMITTING				
	DDRESS AS ABOVE)	LIXI				Fall/Winter Delivery "cutoff" (date):				
(SAIVIE AL	DDRESS AS ABOVE)									
						WEATHER PERMITTING				

# **DAVIS**

Address	ROMEO PLANK AND 27	MILE RD.				Form Required:	Yes		No	Х
City	RAY	State	MI	Zip	48096	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 381-3813					Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A					If yes, what symbol?				
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	TONY SCHOENHER	Phone	(586) 387	1-3813		Borders Required on Foundation:	Yes		No	Х
			Rı	ules & Regula	tions - Installation	Fee				
BRONZE,	, FLUSH GRANITE, BEVE	LS, SLANT	S AND MO	ONUMENTS.						
FOUNDA	TION FEE: .55 PSI - \$125	.00 MINIMU	JM.							
BASES N	O WIDER THAN 14". MAX	KIMUM LEN	IGTH IS 48	3".						
Notes: # 0	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMATI	ON BURIALS PI	ER GRAVE: 1					
(	OR 1 FULL AND 1 CREMATI	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	18096					WEATHER PERMITTING				

# <u>DAVISBURG</u>

									_	
Address	DAVISBURG RD. JUST V	NEST OF I	DILLEY RO	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	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) 699 (810) 739			Borders Required on Foundation:	Yes		No	Х
			R	ules & Regula	ations - Installatio	n Fee				
FLUSH, S	SLANTS, BEVELS & MONU	JMENTS								
FOUNDA	TION FEE:									
.60 PSI, \$	150.00 MINIMUM - Price in	ncludes the	foundatio	n and installati	ion (as of 1-1-25)					
Price is ca	alculated by the size of the	base meau	rement of	the monumen	ıt.					
Notes: #	OF FULL BURIALS PER GRA	NE: 1 # O!	F CREMAT	ION BURIALS F	PER GRAVE: 2					
(	OR 1 FULL AND 1 CREMATION	ON PER GR	AVE							
Installatio	on Fee Payable to: Cash ,	Check, C	С			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	5-5982		Borders Required on Foundation:	Yes		No	Х
			Ru	ıles & Regula	tions - Installatior	ı Fee				
BRONZE	, FLUSH GRANITE, BEVE	LS, SLANT	S AND MO	NUMENTS.						
FOUNDA	TION FEE: .90 PSI									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1								
#	OF CREMATION BURIALS P	ER GRAVE	:: 2 OR 1 FU	JLL AND 1 CRE	MATION PER GRAV	/E				
Installation	on Fee Payable to:					Spring delivery begins (date):				
DAVISON	I TOWNSHIP - ATTN: DE	BBIE KOLI	BE			MAY 1ST OR WEATHER PERMITTING	G			
10207 E.	RICHFIELD					Fall/Winter Delivery "cutoff" (date):				
DAVISON	I, MI 48423					OCTOBER 1ST				

# DEERFIELD

Address	OTTER LAKE RD 3/4 I	MILE W. O	F M-24			Form Required: Yes	$\square$ N	0 X
City	FOSTORIA	State	MI	Zip	48435	Grave Location Required on Memorial: Yes	L—IN	o X
Phone	(810) 793-6700					Symbol Required on Memorial: Yes	N	o X
Fax	(810) 793-4077					If yes, what symbol?		
Email	clerk@deerfieldtownship	.com				Benches Permitted: Yes	X N	о
Contact		Phone	(810) 7	93-6700		Borders Required on Foundation: Yes	X N	o
						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								
Installation	on Fee Payable to:		_			Spring delivery begins (date):		
DEERFIE	LD TOWNSHIP					WEATHER PERMITTING		
30 EAST	BURNSIDE					Fall/Winter Delivery "cutoff" (date):		
NORTH E	BRANCH, 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	Χ
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	Χ	No	
						2" border required for above grou	nd mar	kers		
			R	ules & Regu	lations - Installa	tion Fee				
FLUSH, E	BRONZE, BEVELS, SLANT	S, MONUI	MENTS							
FOUNDA	TION FEE:									
24"x 12" -	\$120.00									
36"x 12" -	· \$160.00									
48"x 12" -	- \$220.00									
Notes: #	OF FULL BURIALS PER GRA	Δ\/E·1 # Ω	F CREMAT	ION BURIALS	PER GRAVE: HP	TO 6				
Notes. #	OR 1 FULL AND 6 CREMAT				TEN ONAVE. OF	10 0				
	OR I FOLL AND O CREWAT	ION BORIA	LS FER Gr	XAVL						
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	Х
City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:			No	X
Phone	(734) 699-8900 ext 6			r		Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 699-5213					If yes, what symbol?				
Email	bbeaudry@vanburen-mi.o	org				Benches Permitted:	Yes		No	Х
Contact	BRITTANY BEAUDRY	Phone	(734) 699-	8909		Borders Required on Foundation:	Yes	Х	No	
			(. 0 .) 000			*Note: Benches must not exceed				
			Rul	es & Regulati	ions - Installation			9		
CHARTE	R TOWNSHIP OF VAN BU	RFN KIRK	CHUCK O	R SAM TO S	TAKE GRAVE TI	HE FAMILY IS RESPONSIBLE FOR FO	UNDAT	TIONS		
	S MUST NOT EXCEED SIZ						0110711	10110.		
DENOME	NOOT NOT EXCLED OR	_L OI OI(/	WE. 140 00	JNDAT ORTI	OLIDAT BONIALO	•				
INCH TO	INSTALL FOUNDATIONS:	\$1 00 DSI								
	INSTALL FOUNDATIONS.	ψ1.00 F SI								
	ΓΙΟΝ FEE: \$50.00 (MARK		NODECTIO	AI)						
FOUNDA	HON FEE. \$30.00 (MARK	ING AND I	NSPECTIO	N)						
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: Check	s Only				Spring delivery begins (date):				
CHARTER	R TOWNSHIP OF VAN BU	REN				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	Χ	No	
City	WARREN	State	MI	Zip	48092	Grave Location Required on Memorial:	Yes	Х	No	
Phone	(586) 751-1313					Symbol Required on Memorial:	Yes		No	Χ
Fax	(586) 751-1866					If yes, what symbol?			i	
Email	cmaddox@detroitmemori	alpark.com				Benches Permitted:	Yes	Х	No	
Contact	CAROL MADDOX	Phone	(586) 751-	1313		Borders Required on Foundation:	Yes		No	Χ
			D. I	oc 9 Dogulati	iona Installation	Enn				
				_	ons - Installation					
	NZE MUST BE MOUNTED									
	NOT ACCEPTED. FOUN									
FLUSH M	IARKERS (SAWN SIDES (	ONLY ON G	RANITE M	ARKERS). BR	ONZE OR GRAN	ITE.				
FOUNDA	TION FEE:									
FLUSH M	ARKERS, BRONZE OR G	RANITE - \$	1.65 PSI							
MONUME	ENTS AND BENCHES - \$1	.75 PSI, MII	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 (	GRAVE: 2 7	# OF CREM	IATION BURIA	ALS PER GRAVE:	2				
OF	R 1 FULL AND 1 CREMATI	ON (AT HE	AD) PER G	RAVE						
			, -							,
Installatio	on Fee Payable to:					Spring delivery begins (date):				
DETROIT	MEMORIAL PARK CEME	TERY				APRIL 15TH				
(SAME AI	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	@detroitmemor	rialpark.com	Benches Permitted:	Yes	Х	No	
Contact	Giavanni or Dominique	Phone				Borders Required on Foundation:	Yes		No	Χ
			R	lules & Regula	tions - Installation	n Fee				
ALL BRO	NZE MUST BE MOUNTED	ON GRAN	NITE BEF	ORE DELIVER	Y TO CEMETERY.	2 NAMES ON A SINGLE				
MARKER	NOT ACCEPTED. FOUN	IDATION F	EE MUST	ACCOMPANY	DELIVERY WITH	MARKER.				
FLUSH M	ARKERS (SAWN SIDES (	ONLY ON C	GRANITE	MARKERS). B	RONZE OR GRAN	IITE.				
FOUNDA	TION FEE:									
FLUSH M	ARKERS, BRONZE OR G	RANITE - S	\$1.65 PSI							
MONUME	NTS AND BENCHES - \$1	.75 PSI, MI	INIMUM C	F \$175.00. BE	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	GRAVE: 2	# OF CRE	EMATION BUR	IALS PER GRAVE	: 2				
OR	1 FULL AND 1 CREMAT	ION (AT HE	EAD) 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**

(SAME ADDRESS AS ABOVE)

									-	
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?			_	
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	Х
			Ru	les & Regulati	ions - Installation	Fee				
FLUSH, C	GRANITE, BEVELS, SLANT	TS AND MO	ONUMENTS	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 ENG	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							
VETERA	N FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED B	BY A REPRESE	ENTATIVE FROM	THE FAMILY AND SEXTON (TIM SIMM	10NS 2	248-80	4-0649	).
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 4	OR 1 FULL AND 1	I CREMATION PER GRAVE				
Installatio	on Fee Payable to:	Cash and	Checks			Spring delivery begins (date):				
WATERF	ORD TOWNSHIP					WEATHER PERMITTING (PLEASE CA	ALL FIR	RST)		

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING (PLEASE CALL FIRST)

## <u>DRYDEN</u>

									1	
Address	MULHOLLAND ROAD					Form Required:	Yes		No	Χ
City	DRYDEN	State	MI	Zip	48428	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(810) 796-2291					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 796-3618					If yes, what symbol?			,	
Email	drydenvillagetreasurer@a	airadv.net				Benches Permitted: Prior approval	Yes	Х	No	
Contact	RANDE LISTERMAN OR JAMES HONNOLD - SEX			96-2291 2207		Borders Required on Foundation:	Yes		No	
				Rules & F	Regulations - Installation	n Fee				
FOUNDA	TION FEE: .30 PSI									
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # 0	OF CREMA	AINS PER	GRAVE: 1 OR 1 FULL AND	1 CREMAINS PER GRAVE				
	on Fee Payable to:					Spring delivery begins (date):				
	OF DRYDEN					WEATHER PERMITTING				
P.O. BOX						Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				
DK I DEN	, MI 48428					IMENTHER PERIMITTING				

## EAST BERLIN

									1	
Address	MASTERS RD. @ BERY	/ILLE				Form Required:	Yes		No	Х
City	ALLENTON	State	MI	Zip	48003	Grave Location Required on Memorial:	Yes		No	Χ
Phone Fax	(810) 798-3793 (810) 798-3793 (CALL F	TIRST)				Symbol Required on Memorial:  If yes, what symbol?	Yes		No	Χ
Email	tracipewinski@yahoo.co	<u>m</u>				Benches Permitted:	Yes		No	Х
Contact	JERRY PEWINSKI	Phone	(810) 6	614-5605		Borders Required on Foundation:	Yes	Х	No	
				Rules & Reg	ulations - Installati	on Fee				
INSTALL	ATION FEE: .50 PSI, \$17	5.00 MINIM	ИUМ							
PAYMEN	T REQUIRED AT TIME C	F FOUNDA	ATION RI	EQUEST.						
Notes: #	OF FULL BURIALS PER GI	RAVE: 1 # C	F CREM	AINS PER GRA	AVE: 2 OR 1 FULL AN	D 1 CREMATION PER GRAVE				
i										
	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**

									_	
Address	1060 ORION RD.					Form Required: FORM	Yes	Х	No	
City	LAKE ORION	State	MI	Zip	48362	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 693-8391					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 693-5874					If yes, what symbol?				
Email	villageadmin@lakeorior	n.us				Benches Permitted: Call first	Yes	Х	No	
Contact	ANDREA EXT. 100	Phone	(248) 6	693-8391		Borders Required on Foundation:	Yes		No	Х
				Rules & Rec	gulations - Installati	on Fee				
GOVERN	MENT MARKERS ON U	NMARKED (	GRAVES	ONLY. GAF	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	ID THAT	· INCLUDES ·	THE BASE.					
FOUNDA	TION FEE: .50 PSI									
24"x 12" -	\$144.00									
36"x 12" -	\$216.00									
NO VA BF	RONZE MOUNTED TO U	UPRIGHTS (	or adde	ED TO GRAV	'ES ALREADY MAR	KED				
	OF FULL BURIALS PEF R 1 FULL BURIAL AND				ER GRAVE 2 (3 WIT	H SPECIAL PERMISSION)				
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				

#### **ELMWOOD**

Installation Fee Payable to: Cash, Check &

**Credit Card VIA phone** 

ELMWOOD CEMETERY

(SAME ADDRESS AS ABOVE)

Address	1200 ELMWOOD AVENU	E				Form Required:		Yes		No	Х
City	DETROIT	State	MI	Zip	48207	Grave Location Requ	ired on Memorial:	Yes		No	Χ
Phone	(313) 567-3453					Symbol Required on I	Memorial:	Yes		No	Х
Fax	(313) 567-8861					If yes, what symbol?	·			1	
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	Χ
			Ru	les & Regulati	ions - Installation	Fee					
FLUSH M	ARKERS, MONUMENTS A	AND ODD [	DUPLICATE	SIZES. CALI	L TO CONFIRM M	IONUMENT AND LED	GER INSTALLATI	ON.			
ENGRAVI	ED PHOTOS AND ETCHIN	IGS ARE A	LLOWED	<u>ONLY ON JET</u>	BLACK GRANIT	E. NO CERAMIC OR	<mark>PHOTOS WITH P</mark>	ROTE(	CTIVE		
GLASS A	LLOWED.										
*IF FAMIL	Y OWNS 2 OR MORE GR	AVES THE	N BENCH	S ALLOWED	IN CERTAIN SEC	TIONS ONLY.					
SLANTS I	NOT ALLOWED IN ALL AF	REAS - CAL	L AHEAD								
FOUNDA <sup>*</sup>	TION FEES: NOTE: (	All memor	ials to be i	nstalled by Eli	mwood Cemetery	<u>Employees)</u>					
16"x 8" & :	24"x 12" - <b>\$300.00</b>	24x13x4 t	o 30x24x4	- \$400.00							
LARGER	THAN 30" x 24" - <b>\$500.00</b>	1/2 LEDG	ERS 30x30	x6 Min - <b>\$500.</b>	00						
LEDGERS	S - <b>\$600.00</b>	MONUME	NT INSTA	LL Per Square	Foot of base = \$2	00.00					
SLANT FE	EE - <b>\$550.00</b> (\$300.00 INS	TALL & \$2	50.00 PRI\	(ILEGE)							
SLANT M	ARKERS 24"x 10"x 16" (O	NLY INDIVI	DUAL) AR	E ALLOWED II	N MOST AREAS.	BRONZE PLAQUE					
AFFIXED	TO A SLANT MARKER AL	LOWED.	CONTACT	CEMETERY T	O BE SURE A SL	ANT MARKER IS					
ALLOWE	O IN THEIR SECTION.										
Notes: #	OF FULL BURIALS PER GRA	AVE: 2 # OF	CREMAINS	S PER GRAVE:	4 OR 1 FULL AND 4	CREMAINS PER GRAV	/E				

Spring delivery begins (date):

APRIL 15TH (OUTSIDE ORDERS)

Fall/Winter Delivery "cutoff" (date):

NOV. 14th (OUTSIDE ORDERS) DEC. 31st (Cemetery Orders-weather permitting)

EVERGREEN CEMETERY

(SAME ADDRESS AS ABOVE)

orers

									_	
Address	19807 WOODWARD AVE	≣.				Form Required: FORM	Yes	X	No	
City	DETROIT	State	MI	Zip	48203	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(313) 368-1330					Symbol Required on Memorial:	Yes		No	Χ
Fax	(313) 368-9849					If yes, what symbol?			_	
Email	evergreen_cemetery@yal	hoo.com				Benches Permitted:	Yes		No	Х
Contact	ANGELA OR BETH	Phone	(313) 368	-1330		Borders Required on Foundation:	Yes		No	Χ
			Ru	iles & Regulat	ions - Installatio	n Fee				
GRANITE	FLUSH MARKERS ONLY	. MONUM	ENTS AND	LEDGERS. N	MONUMENTS MU	IST BE A POLISH 3				
(POLISH	TOP). ALL MONUMENTS	MUST HA	VE A BASE	E AND OVERA	LL HEIGHT NOT	OVER FOUR FEET OR				
LESS TH	AN TWO FEET, FOUR INC	CHES.								
BABY MA	RKERS	250.00	)							
24"x 12" (	SINGLE MARKERS)	275.00	)							
48"x 12" (	COMPANION MARKERS)	375.00	)							
LEDGER	3	750.00	)							
MONUME	ENTS	800.00	)							
	-NT		45556							
IMONOME	ENT & LEDGER SIZES NE	ED PRIOR	APPROVA	AL FROM CEN	IE I EK Y					
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRE	MAINS PER GI	RAVE: UP TO 5 C	R 1 FULL BURIAL AND				
AN	ID UP TO 4 CREMAINS PE	ER GRAVE	. (NOTE: 0	ONLY 2 MARK	ERS ALLOWED (	ON GRAVE)				
Installation	on Fee Payable to:					Spring delivery begins (date):				

Spring delivery begins (date):

MARCH 1ST

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 1ST

### EVERGREEN - GRAND BLANC

							r		
Address	3415 E. HILL RD					Form Required:	Yes	N	0 X
City	GRAND BLANC	State	MI	Zip	48439	Grave Location Required on Memorial:	Yes	N <sub>1</sub>	o X
Phone	(810) 694-6541					Symbol Required on Memorial:	Yes	N	o X
Fax	(810) 694-6541					If yes, what symbol?			
Email	grandblanceverg	reencemetery@g	mail.com			Benches Permitted:	Yes	X N	0
Contact	PHILLIP POTTER SUPERINTENDE		, ,	694-6541 SECRETARY		Borders Required on Foundation:	Yes	N	o <u>X</u>
				Rules & Regu	lations - Installation	ı Fee			
FLUSH M	ARKERS AND MO	DNUMENTS. SE	CTIONS II	NDICATED BY	ROW # AND GRAV	E. CERTAIN SECTIONS ARE SINGLE F	FLAT O	NLY.	
NAME AN	ID DATES ON ME	MORIALS ARE T	O FACE \	NEST (A FEW	EXCEPTIONS IN O	LDER PART OF CEMETERY). MARKER	RS NOT	IN THE	
				•		RS MUST BE OF GRANITE, MARBLE, E			
			`		,	,			
		MAX LENGTH FOR	GRAVES L	OCATED	MAX LENGTH FO	R GRAVES LOCATED			
		IN SECTIONS OD/	ID/7/8		IN ALL OTHER SE	CTIONS			
		OVER 1 GRAVE	36"		OVER 1 GRAVE	40"			
		OVER 2 GRAVES	72"		<b>OVER 2 GRAVES</b>	80"			
		OVER 3 GRAVES OVER 4 GRAVES	108" 144"		OVER 3 GRAVES OVER 4 GRAVES	120" 160"			
		OVER 4 GRAVES	144		OVER 4 GRAVES	100			
FOUNDA	TION FEE: \$10.00	PER LINEAR IN	CH - ALL	MARKERS RE	QUIRE A FOUNDAT	ION (OR SETTING FEE FOR LAWN LE	VEL MA	RKERS)	).
FOUNDA <sup>-</sup>	TIONS ARE TO BI	E INSTALLED BY	THE CEI	METERY. MAX	FOUNDATION WID	TH (MEASURING FRONT TO BACK) IS	24" FO	R ALL M	ARKERS.
NO LIMIT	ON HEIGHT. NO	FOUNDATIONS	ARE PO	JRED AFTER (	OCTOBER 15TH.				
Notes: #	OF FULL BURIAL	.S PER GRAVE:	# OF C	REMAINS PER	R GRAVE: 3				
Installatio	on Fee Payable to	: Cash, Check	& Credit			Spring delivery begins (date):			
EVERGRI	EEN CEMETERY	Card VIA Pr	one			YEAR ROUND IF FOUNDATION IS IN			
(SAME A	DDRESS AS ABO	VE)				Fall/Winter Delivery "cutoff" (date):			

YEAR ROUND IF FOUNDATION IS IN

## **EVERGREEN - LAKE ORION**

Address	CHURCH & LAPEER F	RD.				Form Required: FORM	Yes	X	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?			1	
Email	villageadmin@lakeorio	n.us				Benches Permitted: Designated areas	Yes	Х	No	
Contact		Phone	(248)	693-8391		only Call first!			1	
						Borders Required on Foundation:	Yes		No	Х
				Rules & Re	gulations - Installa	tion Fee				
GOVERN	MENT MARKERS ON L	JNMARKED (	GRAVES	ONLY. GA	RDEN OF CROSS I	NEEDS TO BE FLUSH				
MARKER	BRONZE OR GRANITE	WITH BUIL	T IN VAS	SE.						
MONUME	ENTS NOT TO EXCEED	30" HGT AN	ID THAT	INCLUDES	THE BASE.					
BENCHE	S ARE PERMITTED IN	DESIGNATE	D AREA	S ONLY.						
FOUNDA	TION FEE: .50 PSI									
24"x 12" -	\$144.00									
36"x 12" -	\$216.00									
NO VA BI	RONZE MOUNTED TO	UPRIGHTS (	OR ADD	ED TO GRA	VES ALREADY MAR	RKED				
	OF FULL BURIALS PE				ER GRAVE 2 (3 WI	TH SPECIAL PERMISSION)				
					<del></del>					1
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	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: Y	es	No	
City	ANN ARBOR	State	MI	Zip	Grave Location Required on Memorial: Y	es	No	
Phone					Symbol Required on Memorial: Y	es	No	
Fax					If yes, what symbol?		_	
Email	bradbouchie@ymail.com				Benches Permitted: Call contact Y	es	No	
Contact	BRAD BOUCHIE	Phone	(734) 27	74-7422	Borders Required on Foundation: Y	es X	No	
					2" border on all sides			
			F	Rules & Regulations	- Installation Fee			
FOUNDA	TION FEE:							
.65 PSI, N	MINIMUM \$200.00							
PLUS 2" A	ROUND FOR FOUNDATIONS	5						
APPROX	1 MONTH TO SET FOUND	DATIONS						
1 FLAT M	ARKER ON INFANT OR C	REMATIO	N GRAVE	ES 10x20				
2 LOTS R	EQUIRED TO GET MONU	JMENT						
NO TRIPI	E MARKERS ALLOWED							
Notes:								
_								
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:		Yes		No	Χ
City	BRIGHTON	State	MI	Zip	48116	Grave Location Requi	red on Memorial:	Yes		No	Χ
Phone	(810) 227-0463					Symbol Required on M	Memorial:	Yes		No	Χ
Fax	(810) 227-6420					If yes, what symbol?					
Email	brownt@brightoncity.org					Benches Permitted:	Call contact	Yes		No	
Contact	TARA BROWN	Phone	(810) 227-	0463		Borders Required on	Foundation:	Yes	Χ	No	
						2" borde	er on all sides				
			Rul	les & Regulati	ions - Installation	Fee					
MONUME	NTS, ELEVATED MARKE	RS, AND B	RONZE MA	ARKERS (EXC	EPT GOVERNME	NT). SECTION 11 IS	FLUSH ONLY.				
2" BORDE	ERS FOR FOUNDATIONS	IS REQUIF	RED FOR A	LL UPRIGHT	MONUMENTS. N	O EXCEPTIONS! A L	ARGER FOUND	TION (	CAN E	BE PLA	CED
IF THE SI	PACE PERMITS. EACH PI	LOT IS 44"	WIDE IF	MEMORIAL IS	TO BE ANY LAR	GER, AN ADDITIONAL	PLOT NEEDS T	О ВЕ Р	URCH	IASED.	
INSTALL	FEE FOR FOUNDATIONS	NOT LIST	TED, SEE N	IOTE IN BLUE	BELOW.						
"BRIGHTO	ON HILLS CEMETERY - INCL	UDES VA -	ACROSS S	TREET FROM F	AIRVIEW"						
CONCR	ETE FOUNDATION SIZES					FLUSH MONUMENT	INSTALLATION	<u>FEES</u>			
24"x 12" -		52"x 18" -	\$169.00			16"x 8" - \$75.00		_			
28"x 16" -	not nateu,	58"x 18" -	\$177.00			24"x 12" - \$85.0	O COLUMBA PLAQUES		0		
36"x 16" -	JOI THE HEAT SIZE	60"x 16" -	\$181.00			36"x 12" - \$95.0		,			
40"x 16" -	Jee would be	66"x 18" -	\$183.00			42"x 12", 48"x 12"- \$^	110.00				
42"x 16" -	\$156.00 cheaper than a custom	72"x 18" -	\$190.00			54"x 12" - \$115.0	00				
42"x 18" -	\$160.00 foundation)	00",, 20"	\$198.00								
	\$160.00	60 X 20 -	ψ100.00								
48"x 22" -	\$100.00	98"x 16" -	•								
48"x 22" - <b>Notes:</b> E	\$100.00	98"x 16" -	\$210.00	ONE CREMA	ATION OR 2 CREI	MATIONS					
	\$173.00	98"x 16" -	\$210.00	ONE CREMA	ATION OR 2 CREI	MATIONS					
Notes: E	\$173.00	98"x 16" -	\$210.00	ONE CREMA	ATION OR 2 CREI	MATIONS Spring delivery begi	ns (date):				
Notes: E	\$173.00 ACH PLOT CAN CONTAIN	98"x 16" -	\$210.00	ONE CREMA	ATION OR 2 CREI		• •				

AT THE SEXTON'S DISCRETION

## FAIRVIEW - LINDEN

Address	211 E. SILVER LAKE ROA	٩D				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					Benches Permitted:	Yes	X	No	
Contact	DON GRICE	Phone	(810) 735-	7980		Borders Required on Foundation:	Yes		No	Χ
FOUNDA	TION FEE: .50 PSI, MINIM	IUM \$100.0	OO. VA MAF	RKER FEE IS	\$31.00					
NO GRAV	/E MARKER LARGER THA	N 36" x 18	" IS PERMI	TTED ON A SI	INGLE GRAVE;					
NO MARI	KER LARGER THAN 72" x	18" IS PEF	RMITTED IN	I FAIRVIEW C	EMETERY.					
Notes: #	OF FULL BURIALS PER G	RAVF: 1	# OF CREN	MAINS PER GE	RAVF· 6					
.10133. #	O. A GLE BOTTINEOT ETC		OI OILL							
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	LINDEN					APRIL 30TH				
132 E. BR	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	X	No	
City	FARMINGTON HIL	LS <b>Stat</b>	e MI	Zip	48335	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	Χ
	31555 W. ELEVEN M FARMINGTON HILLS		ne			Borders Required on Foundation:	Yes		No	Х
				Rules & R	egulations - Insta	llation Fee				
HISTORI	CAL CEMETERY - B	URIALS FO	R EXISTING	G PLOTS ON	NLY.					
EAST FA	RMINGTON CEMET	ERY IS LO	CATED ON	THE NORTH	SIDE OF TWELV	E MILE ROAD,				
BETWEE	N MIDDLEBELT ANI	O INKSTER								
AKA Utle	KA Utley Cemetery									
WEST FA	ARMINGTON CEMET	TERY IS LC	CATED AT	THE SOUTH	HEAST CORNER (	OF TWELVE MILE & HALSTED.				
1.00 PSI										
Installation	on Fee Payable to:	CASH, CH	ECK			Spring delivery begins (date):				
Inch Mem	norials	CC VIA PH	IONE			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 RE	<b>D</b> .					Form Required:		Yes		No	Х
City	FARMINGTON HILLS	State	MI	Zip	48334		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 HCM	MIKE WILLENBERG HURON CEMETERY MA		` ,	887-6700			Borders Required on F	oundation: r on all sides	Yes	Х	No	
				Rules & Re	gulations - In	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUME	ENTS - 36" N	MAX PER GRA	VE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYI	PES	<u>\$250.00</u>								
FLUSH SI	USH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)											
\$0.50 PSI	.50 PSI, MINIMUM \$175.00											
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BR	ONZE C	N CONCRE	TE (NON VA)							
\$0.70 PSI	OF FOUNDATION, MININ	иUM \$250.	00									
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL S	SIDES THAN	MONUMENT	BASE.						
ADD 4" T0	D LENGTH AND WIDTH (	OF BASE T	O DETE	ERMINE FOL	JNDATION 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 FO	R BUILT IN	N VASE)					
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.	CHECK				Spring delivery begir	ns (date):				
HURON C	EMETERY MAINTENANO	CE CC V	IA PHO	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	0	Χ
City	RIVERVIEW	State	MI	Zip	48193	Grave Location Required on Memorial:	Yes	No	0	Χ
Phone	(734) 282-3145					Symbol Required on Memorial:	Yes	No	0	Χ
Fax	N/A					If yes, what symbol?				
Email	ferndalecemetery@gr	mail.com				Benches Permitted:	Yes	No	0	Χ
Contact	RALPH E. or LYDIA E. ODELL	Phone OI	` ,	658-5724 58-5725		Borders Required on Foundation:	Yes	No	o	Χ
				Rules & Regu	ılations - Installa	tion Fee				
ELMHUR	ST - FLAT MARKERS	ONLY (SINGL	E GRAN	IITE 24"x 12"x 4	4"), (COMPANION	N GRANITE 48"x 12"x 6")				
GLENDAI	E, OAKLAWN, MAPLI	EHURST, PINI	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	MARKERS 16"x 10"x 4"	FLAT GRANI	TE							
MONUME	NTS - <u>BASE</u> NO LESS	S THAN 4' OR	MORE 7	ΓHAN 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	I 2' HIGH FROM I	BASE.				
NO BRO	NZE ALLOWED. MARI	KERS ON SAN	IE LOT	MUST BE DUP	PLICATE.					
FOUNDA	TION FEE:									
	4" (BABY) - \$250.00	4' BASE	- \$600.0	0						
24"x 12" (	GRANITE - \$250.00	4'6" BAS								
48"x 12"x	6" FLUSH - \$500.00	5' BASE	- \$700.0	0						
Notes: # 0	OF FULL BURIALS PER	GRAVE: 1 # O	F CREM	AINS PER GRAV	/E: 3 OR 1 FULL AI	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	Χ
Fax	(810) 686-5930					If yes, what symbol?				
Email	thamp@stonemor.com					Benches Permitted: Call for restrictions	Yes	Х	No	
Contact	TAMMY HAMPTON	Phone	,	47-5644		Borders Required on Foundation:	Yes	Х	No	
	RICK ANGELINE - GROUN	IDS SUPERI	NTENDE	NT		2" border req. on flush markers, 4" border on	monum	ents		
				Rules & Regu	ılations - Installati	on Fee				
FOUNDA	TION FEE:									
BRONZE	<b>ONLY</b> - \$495.00 FOR SIN	IGLE MAR	KERS W	ITH A BASE U	IP TO 28"x 18"x 4"					
PROOF C	F MARKER INCLUDING	SPECS MI	JST BE	SUBMITTED T	TO FLINT MEMOR	IAL				
COMPAN	ION MARKERS AND BEN	ICHES - \$8	95.00							
FOR APP	ROVAL PRIOR TO PROD	OUCTION.	NO ENG	RAVING IN GI	RANITE - IT MUST	BE DONE IN THE				
BRONZE.	MUST BE MOUNTED O	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	00						
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 (	GRAVE: 1 (	DEPEND	ING ON LOCA	ATION) # OF CRE	MAINS PER GRAVE: 2				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FLINT ME	MORIAL PARK					APRIL 1ST				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						OCTOBER 30TH				

## **FLUSHING**

Address	750 COUTANT ROAD					Form Required:	Yes	\	٧o	Х
City	FLUSHING	State	MI	Zip	48433	Grave Location Required on Memorial:	Yes	١	٧o	Х
Phone Fax	(810) 659-5665 (810) 659-0569					Symbol Required on Memorial:  If yes, what symbol?	Yes	N	No	Χ
Email	Ejones@flushingcity.com					Benches Permitted: <i>With permission</i>	Yes	X	No	
Contact	JEFF CLARK	Phone	(810) 659	-5665		Borders Required on Foundation:		X		
			(,			2" border required				
			Ru	ıles & Regulat	tions - Installation	Fee				
FOUNDA	TION FEE: .65 PSI									
		NS								
Notes: #	OF FULL BURIALS PER GRA	VE: 1 - # (	OF CREMAII	NS PER FULL B	BURIAL LOT: 2 - # C	F CREMATION BURIALS PER LOT IN CRE	MATION :	SECTI	ON: 1	
	OR 2 ADDITIONAL CREMAII									
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FLUSHIN	G CEMETERY OR CITY O	F FLUSHI	NG			WEATHER PERMITTING (USUALLY N	ЛАҮ 1ST)	)		
725 EAST	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	n Fee				
FOUNDA	TION FEE:									
.65 PSI, N	MINIMUM \$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	ΓERY 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	1 CREMATION PER GRAVE				
Installation	on Fee Payable to:	CASH, Ch	IECK			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	lo [	Χ
City	DETROIT	State	MI	Zip	48227	Grave Location Required on Memorial:	Yes	N	lo l	Χ
Phone	(313) 224-3270					Symbol Required on Memorial:	Yes	N	lo [	Χ
Fax	(313) 224-1629					If yes, what symbol?				1
Email						Benches Permitted:	Yes	N	lo	
Contact	DETROIT CITY CLERK PLANNING & DEVELOPM		(313) 224	-3270		Borders Required on Foundation:	Yes	N	lo	
			Ru	ıles & Regulat	ions - Installation	ı Fee				
СЕМЕТЕ	RY UNDER RE-ORGANIZA	ATION.								
https://det	roitmi.gov/departments/par	ks-recreat	ion/cemete	ries/forest-hill-o	cemetery					
contact <sup>9</sup>	ST Enterprises I directly	at 313-40	00-5304							
contacts	or Enterprises rancetry	ut 515 +	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: MSLIA FORM	Yes	Χ	No	
City	DETROIT	State	MI	Zip	48234	Grave Location Required on Memoria	l: Yes		No	Х
Phone Fax	(313) 921-6960 (313) 921-0754					Symbol Required on Memorial:	Yes		No	Χ
Email	jbokas@plcorp.com					If yes, what symbol?			1	
						Benches Permitted: Call the office	Yes	X	No 	
	John Bokas, GM Partners	Phone				Borders Required on Foundation:	Yes		No	Χ
				Rules & Re	gulations - Installatio	on Fee	•			
GRANITE	, BRONZE AND MONUM	ENTS IN D	ESIGNA <sup>-</sup>	ΓED AREAS	. NO BRONZE VASE	S ALLOWED.				
BRONZE	MUST HAVE GRANITE E	BASE <b>EVEN</b>	IF MAT	CHING ONE	THAT HAS CONCR	ETE.				
CEMETE	RY FEES: new pricin	g effective	10-7-24		MEMORIAL SURV	EY LAYOUT INSPECTION ASSESSME	NT FEE	(MSLI	A):	
					COMPANION/ BEN	NCH/ PRIVATE COLUMBARIA - \$1,499.0	)0			
Foundati	on Fee: \$1.00 PSI Paya	ble to Fore	st Lawn		SINGLE/ BOULDE	R/ CREMATION MEMORIAL - \$899.00				
	(in addition to	flagging fo	ee)		VETERAN/ BABY/	INFANT/ PET - \$499.00				
INCH ME	MORIALS SETTING FEE	: \$1.00 PS	l payable	to Inch Men	morials	** CALL JOE TO DELIVER 248-756-	9538 **			
								7		
						**NOTE: EMAIL CEMETERY FORM	TO:			
						ypotts@forestlawndetroit.com				
MONUME	NTS & BENCHES: \$1.00	PSI OF B	ASE			AND SEND COPY WITH CHECK				
REMOVA	L FEE - \$75.00									
Notes: #	OF FULL BURIALS PER GF	RAVE: # C	F CREMA	INS PER GR	AVE: OR FULL AND	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
						APRIL 1ST				
						Fall/Winter Delivery "cutoff" (date):				
						OCT. 31st (Flush) Monuments - Yea	r round i	if found	ation i	s in

## FOREST LAWN - SAGINAW

Address	3210 S. WASHINGTON	AVE.				Form Required:	Yes	No	Х
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	chilbrandt@saginaw-mi.c	<u>om</u>				Benches Permitted: Unless owned	Yes	No	Х
Contact	CHERYL HILBRANDT	Phone	(989) 759-	1656		Borders Required on Foundation:	Yes	No	Х
			Rule	es & Regulati	ons - Installation	Fee			
GRANITE	MARKERS ONLY - NO B	RONZE							
FOUNDA	TION FEE:								
.55 PSI, N	IINIMUM \$165.00. GRAN	ITE ONLY.							
SOME SE	CTIONS PERMIT FOR FL	_USH MARI	KERS ONLY	<b>'</b> .					
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 WITH	THE RIGHT	OF SECOND B	URIAL OF CREMAI	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**

(SAME ADDRESS AS ABOVE)

							_		-	
Address	5240 CIVIC CENTER DR	IVE				Form Required:	Yes		No	Χ
City	WATERFORD TWP	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>dmi.gov</u>				Benches Permitted:	Yes	Χ	No	
Contact	MARY BELLEHUMEUR	Phone	(248) 618	-7437		Borders Required on Foundation:	Yes		No	Х
DPW	BRETT THOMPSON: 248	3-639-8450								
			Ru	les & Regulati	ons - Installation	Fee				
FLUSH, G	RANITE, BEVELS, SLAN	TS AND MO	ONUMENTS	S. <b>Single G</b> f	RAVE IS <mark>TO BE N</mark> O	D LARGER THAN 30".				
SECTION	A - MEMORIALS WILL BE	E 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 E	BY A REPRESE	ENTATIVE FROM	THE FAMILY AND SEXTON (TIM SIMM	IONS 24	8-804	4-0649	)).
Notes: # 0	F 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 A	Accepted			Spring delivery begins (date):				
WATERFORD TOWNSHIP					WEATHER PERMITTING (PLEASE CALL FIRST)					

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING (PLEASE CALL FIRST)

#### **FRANKLIN**

P.O. BOX 112

HIGHLAND, MI 48357

										_	
Address	26220 SCENIC HIGHWA	Y, FRANK	(LIN RD.			Form Required: ADMIN	N FEE \$150.00	Yes	X	No	
City	FRANKLIN	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) 8	87-6700		Borders Required on F	oundation:	Yes	Х	No	
HCM	HURON CEMETERY MA	INTENAN	CE			2" bord	der on all sides			_	
				Rules & Regulations - I	nstallation	Fee	STEVE B	ANCPO!	<del>.</del> T		
BRONZE	, FLUSH GRANITE, SLAN	TS, AND N	ИОNUME	NTS - 36" MAX PER GR	AVE			00-9493	;		
GOVERNMENT ISSUED MARKERS - ALL TYPES\$250.00							ALL MEMORIALS MUST				
FLUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)						BE APPRO	BE APPROVED BY AND ORDERED THROUGH THE FRANKLIN CEMETERY				
\$0.50 PSI, MINIMUM \$175.00						THE F					
FOUNDATION FEE FOR MONUMENTS & BRONZE ON CONCRETE (NON VA)						_	CIATION	ı.			
\$0.70 PSI OF FOUNDATION, MINIMUM \$250.00					THE PRO	CEMETE	RY A				
ALL FOU	NDATIONS MUST BE 2" L	_ARGER C	N ALL SI	DES THAN MONUMENT	ΓBASE.		MANAGE \$150 M	ADE OUT	T TOI		
ADD 4" T	O LENGTH AND WIDTH (	OF BASE T	TO DETE	RMINE FOUNDATION S	IZE NEED	≣D.	FRANKLII	N CEIVIE	EKY.		
ADD \$50.	00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS						48x14x48	MAX F	ООТЕ	PRINT	
CORNER	MARKERS (SET OF 4)	\$125.00					FOR MO	NUMEN	ΙΤ		
VASE ON	ILY	\$100.0	0 (ADD \$	50.00 FOR ALL FEES FO	OR BUILT I	N VASE)	NO PAIN	T/LITH(	O		
Notes: #	OF FULL BURIALS PER GR	:: AVE: 1 # C	OF CREMA	TION BURIALS PER GRAV	VE: 2-3						
(C	ALL MIKE @ HURON CEME	TERY MAIN	ITENANCI	E FIRST)							
Installation	on Fee Payable to:	CASH.	CHECK			Spring delivery begin	s (date):				
HURON CEMETERY MAINTENANCE CC VIA PHONE WEATHER PERMITTING						NG					

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

## <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						
Rules & Regulations - Installation Fee										
FLUSH, S	LANTS, BEVELS & MONU	MENTS								
FOUNDA <sup>-</sup>	ΓΙΟΝ FEE:									
.60 PSI, \$	150.00 MINIMUM - Price in	cludes the	foundation	and installation (as of	1-1-25)					
Price is ca	lculated by the size of the b	oase meau	rement of th	ne monument.						
Notes: #		N/E. 4 # 0	E ODEMAINI		THE AND	LODEMATION DED CDAVE				
Notes. #	OF FULL BURIALS PER GRA	AVE. I # O	r CREWAIN.	S PER GRAVE. 2 OR 1 F	OLL AND	CREMATION PER GRAVE				
Inetallatio	on Fee Payable to:					Spring delivery begins (date):				
	-					WEATHER PERMITTING				
	VALLEY VAULT									
	HOLLY RD.					Fall/Winter Delivery "cutoff" (date):				
HOLLY, M	II 48442					WEATHER PERMITTING				

### <u>GETHSEMANE</u>

Address	10755 GRATIOT					Form Required:	Yes	No	Χ
City	DETROIT	State	MI	Zip	48213	Grave Location Required on Memorial:	Yes	No	Χ
Phone Fax	(313) 778-2352 TEMP # (313) 267-4258					Symbol Required on Memorial:  If yes, what symbol?	Yes	No	Χ
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					•			
			Rı	ıles & Regulat	tions - Installation	ı Fee			
FLUSH BF	RONZE AND GRANITE, MON	UMENTS AI	ND SLANTS	(DEPENDING	ON SECTION). UPF	RIGHT MARKERS ARE			
ALLOWED	O ONLY IN SEC. A, B, C, D, E	, EL, F, G, L	. & R.						
*BENCHE	S PERMITTED DEPENDING	ON SECTION	ON (CALL F	IRST)					
FOUNDAT	ΓΙΟΝ FEE:								
24x12x4 F	LUSH \$275.00								
CEMETER	RY TO SET MARKER!								
CALL FOR	R FEE FOR LARGER THAN 2	4x12x4							
No found	dation required for Flush,	Bevels, S	ants Half a	and Full Ledge	ers				
ALL BEN	ICHES AND UPRIGHT MO	NUMENT	S MUSH H	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 TO	:	MAY 1ST			
10755 GF	RATIOT	Pre	mier Group	Associates		Fall/Winter Delivery "cutoff" (date):			
DETROIT	Г, MI 48213					NOVEMBER 1ST			

#### **GLEN EDEN - EAST**

Address	19810 26 MILE ROAD					Form Required: <u>Approved Layout</u>	Yes	Х	No	
City	MACOMB TOWNSHIP	State	MI	Zip	48042	Grave Location Required on Memorial:	Yes		No	Х
Phone	(586) 677-5400					Symbol Required on Memorial:	Yes		No	Х
Fax	(586) 207-1393					If yes, what symbol?				
Email	nbellafaire@glenedenmer	norialpark.	<u>org</u>			Benches Permitted:	Yes		No	Х
Contact	NICOLE BELLAFAIRE	Phone	(586) 677-5	5400		Borders Required on Foundation:	Yes		No	Х
							_			
				0.5.	1 4 11 41	_				1

#### Rules & Regulations - Installation Fee

BRONZE, FLUSH GRANITE AND MONUMENTS ALLOWED. VASES ALLOWED. GRANITE BASES ALLOWED.

NO BRONZE OVER INTERNAL ALLOY. SLANTS, BEVELS OR BENCHES ARE NOT ALLOWED.

FOUNDATION FEE:		2025 OUTSIDE DEALER SETTING & CARE CHARGES			
INDIVIDUAL MEMORIAL	400.00	(WITH OR WITHOUT GRANITE SUP	PORT):		
(BRONZE OR GRANITE)	400.00	24"x 12" BRONZE MARKER	400		
DOUBLE INTERMENT (2 GRAVE)		24"x 14" BRONZE MARKER	400		
COMPANION MEMORIAL	500.00	16"x 24" BRONZE MARKER	400		
(2) 24"x 12" OR (2) 24"x 14"	500.00	24"x 30" BRONZE MARKER	500		
(BOTH MARKERS ON 1 GRANITE	BASE)	36"x 13" BRONZE MARKER	500		
HALF LEDGER 24"x 30"	500.00	44"x 14" BRONZE MARKER	500		
FULL LEDGER	CALL OFFICE FOR FEES AND APPROVAL	54"x 16" BRONZE MARKER	500		
VA MARKER	400.00	60"x 20" BRONZE MARKER	500		
UPRIGHT MONUMENT	CALL OFFICE FOR FEES AND APPROVAL	VAMP PACKAGES (2) 24"x 12" BROM	IZE MARKERS		
Notes: # OF FULL BURIALS PER GRA	VE: 1 # OF CREMAINS PER GRAVE: 4	unitized on a single granite base	500		

Installation Fee Payable to & Mailed to the Followir	ıg:
--	-----

GLEN EDEN MEMORIAL PARK

(SAME ADDRESS AS ABOVE)

Send all paperwork to
Nicole at Glen Eden East

Spring delivery begins (date):	
APRIL 1ST	
Fall/Winter Delivery "cutoff" (date):	
OCTOBER 31ST	

## **GLEN EDEN - LIVONIA**

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	Х
Phone	(248) 477-4460					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 477-3915					If yes, what symbol?				
Email	jwalters@glenedenmemo	rialpark.org	1			Benches Permitted:	Yes		No	Х
Contact	JANETTE	Phone	(248) 477	-4460		Borders Required on Foundation:	Yes		No	X

	Rules & Regulations - Installation Fee							
GARDEN DEVOTION IS GRANITE.	GARDEN DEVOTION IS GRANITE. ALL OTHER LOCATIONS ARE BRONZE.							
VASES ALLOWED. GRANITE BASE	S ALLOWED. 24"x 8"x 28" / 32"x 14"x 8" \$	SINGLES ALLOWED						
INDIVIDUAL MEMORIAL	400.00	2025 OUTSIDE DEALER SETTING &	CARE CHARGES					
DOUBLE INTERMENT (FOR 1 GRAVE)	400.00	(WITH OR WITHOUT GRANITE SUPF	PORT):					
COMPANION MEMORIAL	500.00	24"x 12" BRONZE MARKER	400					
(2) 24"x 12" OR (2) 24"x 14" (BOTH		24"x 14" BRONZE MARKER	400					
MARKERS ON 1 GRANITE BASE)	500.00	16"x 24" BRONZE MARKER	400					
HALF LEDGER 24"x 30"	500.00	24"x 30" BRONZE MARKER	500					
FULL LEDGER	CALL OFFICE FOR FEES AND APPROVAL	36"x 13" BRONZE MARKER	500					
VA MARKER	400.00	44"x 14" BRONZE MARKER	500					
VA & MATCH (ON GRANITE		54"x 16" BRONZE MARKER	500					
CENTERED BETWEEN 2 GRAVES)	500.00	60"x 20" BRONZE MARKER	500					
FAMILY ESTATE	CALL OFFICE FOR FEES AND APPROVAL	VAMP PACKAGES (2) 24"x 12" BRON	ZE MARKERS					
Notes: # OF FULL BURIALS PER GRAV	VE: 1 # OF CREMAINS PER GRAVE: 4	unitized on a single granite base	500					

Installation Fee Payable to:	VISA, MASTERCARD & CHECKS ONLY
GLEN EDEN MEMORIAL PARK	
(SAME ADDRESS AS ABOVE)	

Spring delivery begins (date):	
APRIL 1ST	
Fall/Winter Delivery "cutoff" (date):	
OCTOBER 31ST	

## GLEN EDEN - ST. CLAIR

Address	s (NO DELIVERIES TO ST. CLAIR - DELIVER TO LIVONIA ONLY)				Form Required:	Yes	Х	No					
City	ST. CLAIR State MI Zip		Zip	Grave Location Required on Memorial:	Yes		No	Х					
Phone Fax	(248) 477-4460 (248) 477-3915	9) 477 2015						No	Х				
Email	jwalters@glenedenmem	orialpark.ord	1		If yes, what symbol?								
				4400	Benches Permitted: Single Pedestal only	Yes	X	No					
Contact	TANETTE Phone (248) 477-4460 Borders Required on Foundation:		Borders Required on Foundation:	Yes		No							
			Ru	les & Regulations - Insta	Illation Fee								
CREMAT	ION ONLY												
FLAT FLU	JSH BRONZE OR GRANI	TE MARKE	RS										
FOUNDA	TION FEE:												
24"x 12"x	4" SINGLE - \$400.00												
24"x 16"x	4" COMPANION - \$500.0	00											
NO DELIV	/ERIES TO ST. CLAIR - [	DELIVER TO	) LIVONIA L	LOCATION ONLY									
Notes: N	O FULL BURIALS ALLOWE	D - 1 # OF C	REMAINS P	ER GRAVE: 2									
Installatio	on Fee Payable to:				Spring delivery begins (date):								
GLEN ED	EN MEMORIAL PARK				APRIL 1ST								
35667 W.	8 MILE RD.				Fall/Winter Delivery "cutoff" (date):								
LIVONIA	MI 48152				OCTOBER 31ST								

## **GLENWOOD - FLINT**

MACOMB, MI 48042

									_				
Address	2500 WEST COURT STE	REET				Form Required:	Yes		No	Х			
City	FLINT	State	MI	Zip	48503	Grave Location Required on Memo	rial: 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: Single Pedestal of	nly Yes	Х	No				
Contact	CHERI ARCOME	Phone	(586) 6	377-5400		Borders Required on Foundation:	Yes		No	Χ			
				Rules & Reg	ulations - Installa	tion Fee							
FOUNDA	TION FEE:												
24" X 12"	X 4" - \$250.00												
24" X 10"	X 16" - \$250.00												
MONUME	ENTS & BENCHES - \$125.	00 PER LI	NEAR FO	OOT									
ALL FLUS	SH, SLANTS & BEVELS AF	RE TO BE	DELIVER	RED TO ELM	WOOD CEMETER	Υ.							
MONUME	ENTS & BENCHES ARE TO	O BE DELI	VERED 7	TO GLENWC	OOD CEMETERY.								
						emai	all paper Arcome v : ne02@gn						
Notes: #	OF FULL BURIALS PER GR.	AVE: 1 # C	OF CREMA	AIN/PER GRAV	/E: 3 OR 1 FULL AN	D 3 CREMAINS PER GRAVE							
Installatio	on Fee Payable to: <u>GLEN</u>	IWOOD C	EMETER	<u></u>		Spring delivery begins (date):							
Mail to:	BIRCHWOOD CEMETER	RY				APRIL 15TH							
	19810 26 MILE ROAD Fall/Winter Delivery "cutoff" (date):												

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	Х	
Phone Fax	(734) 721-8600 (734) 721-2048					Symbol Required on Memorial:  If yes, what symbol?	Yes	No	Χ	
Email	brose@cityofwayne.com					Benches Permitted:	Yes	No	Х	
Email	equeen@cityofwayne.com	<u>1</u>				Borders Required on Foundation:	Yes	No	X	
Contact	BARB ROSE or ED QUEEN					Bordoro regamos or r ouridation.				
Rules & Regulations - 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	IS PER GRAVE:	4 OR 1 FULL AND	2 CREMAINS PER GRAVE				
Installatio	on Fee Payable to: CITY (	OF WAYN	E			Spring delivery begins (date):				
CITY OF	WAYNE					NO CUTOFF - WEATHER PERMITTIN	IG			
35200 FOREST ST.				Fall/Winter Delivery "cutoff" (date):						
WAYNE,	MI 48184					NO CUTOFF - WEATHER PERMITTIN	IG			

## GOODLAND TOWNSHIP

Address	ddress SOUTH EAST SIDE OF M-53 & ARMSTRONG RD.					Form Required:	Yes		No	Х			
City	IMLAY CITY	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	Х			
Phone	(810) 724-0169					Symbol Required on Memorial:	Yes		No	Χ			
Fax	(810) 721-0698					If yes, what symbol?							
Email	goodland@bigtube.net						Yes		No	Х			
Contact	MAVIS ROY	Phone	(810) 724	1-0169		Borders Required on Foundation:	Yes		No	Χ			
			D	ulas <sup>9</sup> Dagulations In	otaliation	Ena							
Rules & Regulations - Installation Fee													
FOUNDATION FEE:													
.25 PSI, \$125.00 MINIMUM													
PAYMEN	PAYMENT REQUIRED AT TIME OF FOUNDATION REQUEST.												
Notoci #	OF FULL BURIALS PER GR	۸۱/۲. ۱ # ۵				A CREMATION RED CRAVE							
Notes. #	OF FULL BURIALS FER GR.	AVE. I #C	JE CREIVIAII	NS FER GRAVE. 2 OR 1 I	FULL AND	I CREMATION FER GRAVE							
Installation	on Fee Payable to:				•	Spring delivery begins (date):							
GOODLAND TOWNSHIP					WEATHER PERMITTING (If foundation prev. installed)								
2374 N. VAN DYKE RD.						Fall/Winter Delivery "cutoff" (date):							
IMLAY CITY, MI 48444						WEATHER PERMITTING							

## <u>GRACELAWN</u>

Address	5710 N. SAGINAW ST.					Form Required: FORM	Yes	Χ	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	Х		
						http://www.gracelawn-cemetery.com/	•					
	Rules & Regulations - Installation Fee											
FLUSH, S	FLUSH, SLANTS, BRONZE, MONUMENTS											
,	,											
FOUNDA <sup>-</sup>	FOUNDATION FEE:											
FLUSH - 1.10 PSI - MINIMUM \$200.00												
	/MONUMENT - 1.30 PSI											
OI KIOIII	, WONDINE N. T.OOT OF											
I OT 8 GE	DAVE # NEEDS TO BE ON	I BOTTOM	DIGHT CO	DNED OF ST	ONE							
LOT & GRAVE # NEEDS TO BE ON BOTTOM RIGHT CORNER OF STONE.												
Notes: #	OF FULL BURIALS PER G	BRAVE: 1	# OF CREM	IAINS PER GI	RAVE: 2							
Г										1		
Installatio	on Fee Payable to: Check	& Credit (	Card			Spring delivery begins (date):						
GRACELA	AWN CEMETERY VIA	Phone				APRIL 16TH						
(SAME AS	S ABOVE)					Fall/Winter Delivery "cutoff" (date):						
						OCTOBER 31ST						

## <u>GRAND LAWN</u>

										_		
Address	23501 GRAND RIVER	AVENUE				Form Required:	MSLIA FORM	Yes	X	No		
City	DETROIT	State	MI	Zip	48219	Grave Location Re	equired on Memorial	Yes		No	Х	
Phone Fax Email	(313) 531-2050 (313) 531-2783 <a href="mailto:lwood1@everstorypartr">lwood1@everstorypartr</a>	ers.com	APPROVED E	TS WILL NEED TO BY THE PARK PERINTENDANT		Symbol Required  If yes, what symi		Yes		No	Х	
Contact	Tonya Wood	Phone	(313) 531	1-2050		Benches Permitte		Yes	Х	No		
Everstory	Partners		, ,			Borders Required	on Foundation:	Yes		No	Х	
			Rı	ıles & Regulat	ions - Installation	Fee					•	
BRONZE MUST BE MOUNTED ON A GRANITE BASE, INCLUDING VA MARKERS. IF THEY INSIST ON CONCRETE. IT IS THE SAME PRICE AS												
GRANITE	. ANY COLOR GRANIT	E BRONZI	E BASE IS A	LLOWED. 24X)	x12 BRONZE MEN	ORIALS. NO SLAI	NTS OR BEVELS AL	LOWE	D. ONL	Υ.		
STEEL C	AMEOS MAY BE INSTA	LED ON F	FLUSH MARI	KERS. NO SING	GLE GRAVE MON	UMENTS. ALL MO	NUMENTS REQUIR	E 2 OR	MORE	Ē		
GRAVES	AND MUST MEET CEM	ETERY'S I	REQUIREME	NTS. <b>24x12x4</b>	FLUSH MARKER	S ONLY IN SECTION	ONS Y, 30, 24 AND	25.				
Sections	Y, 30, 24 and 25 we are	no longe	r accepting a	any markers of	ther then Flats (24	4x12)						
CEMETE	RY FEES: new prici	ng effectiv	ve 10-7-24	MI	EMORIAL SURVE	Y LAYOUT INSPE	CTION ASSESSME	NT FEE	(MSLI	A):		
				CC	OMPANION/ BENC	CH/ PRIVATE COL	JMBARIA - \$1,499.0	0				
Foundati	on Fee: \$1.00 PSI Pay	able to Gr	and Lawn	SII	NGLE/ BOULDER	R/ CREMATION MEMORIAL - \$899.00						
	(in addition to	o flagging	fee)	VE	TERAN/ BABY/ INFANT/ PET - \$499.00							
INCH MEI	MORIALS SETTING FEE:	\$1.00 PSI	payable to In	ch Memorials								
						36"x 12"x 4" ALL	OWED FOR SINGL	E				
MEMORIA	AL REMOVAL FEE: \$75	.00				2 MARKERS ALLOWED PER GRAVE.						
NO SING	LE GRAVE MONUMENT	S-STEEL	CAMEOS O	NLY-NO SLAN	TS OR BEVELS							
Notes: # C	F FULL BURIALS PER GR	AVE: 1 # C	F CREMAINS	PER GRAVE: 1	(UNLESS A CREMO	RIAL MEMORIAL IS	USED)					
											•	
Installatio	on Fee Payable to:					Spring delivery begins (date): FLUSH - ANYTIME						
						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	ST OF RIG	CKETT RO	DAD		Form Required:	Yes		No	Χ
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	clerk@greenoaktwp.com					Benches Permitted:	Yes	Х	No	
Contact	MICHAEL SEDLAK	Phone	(810) 23	1-1333		Borders Required on Foundation:	Yes	Х	No	
	TOWNSHIP CLERKS DEPT.					2" border required				
			R	ules & Regu	ulations - Installa	tion Fee				
TOWNSH	IIP TO DO THE FOUNDAT	ION. 24"	X 12" X 4"	REQUIRES	A 28" x 16" FOU	NDATION = \$250.00				
FOUNDA	TION FEE:									
28" X 16"	- \$250.00									
40" X 16"	40" X 16" - \$350.00									
48" X 16"	- \$450.00									
ODD SIZE	FOUNDATIONS .60 PSI									
CREMAT	ION BURIAL VAULT - \$275	5.00								
MEMORIA	ALS MUST HAVE 2" BORI	DER ON A	LL SIDES	}						
CALL CLE	ERKS OFFICE BEFORE DE	ELIVERY S	SO GRAVI	E CAN BE S	TAKED. INSTALI	_ATION REQUIRES A				
GREEN C	OAK TOWNSHIP EMPLOYE	EE TO BE	PRESEN	Γ.						
Notes: #	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: Cash &	k Checks	Accepted			Spring delivery begins (date):				
GREEN C	OAK CHARTER TOWNSHIP	P				WEATHER PERMITTING				
10001 SII	10001 SILVER LAKE ROAD  Fall/Winter Delivery "cutoff" (date):									

WEATHER PERMITTING

#### <u>GREENWOOD - BIRMINGHAM</u>

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	Χ	No	
Contact	CHERI ARCOME	Phone	(248) 928	3-4094	Borders Required on Foundation:	Yes		No	Х
			Ru	ıles & Regulations - Installation	Fee				
NEW SEC	CTION (F-NORTH) - FLUSI	H GRANITI	EONLY. M	MONUMENTS, BEVELS, SLANTS	S, ELSEWHERE.				
CEMETE	RY DOES FOUNDATIONS	AS NEED	ED. FOUN	IDATION MUST BE IN BEFORE I	DELIVERY.				
FOUNDA	TION FEE:								
24"x 12"x	4" FLUSH, 24"x12" BEVEL	.S & SLAN	ΓS = \$300.	00					
36"x 12"x	4" AND 48"x 12"x 4" FLUS	H = \$400.0	0						
SLANTS	& BEVELS LARGER THAN	24"x 12" (	N SINGLE	GRAVE: FOUNDATION FEE = S	\$150.00/LINEAR FOOT				
ALL FLUS	SH, SLANTS & BEVELS AF	RE TO BE I	DELIVEREI	D TO GREENWOOD CEMETER'	Υ.				
MONUME	ENTS & BENCHES ARE TO	BE DELI	/ERED TO	GREENWOOD CEMETERY.					
(2) 24"x	12" PER GRAVE MAX.								
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CRE	MAINS PER GRAVE: 3 OR 1 FU	ILL AND 2 CREMAINS				
PE	R GRAVE BUT ADDITION	AL RIGHT:	S OF BURI	IAL WOULD NEED TO BE PURC	HASED.				
Installatio	on Fee Payable to: <u>CITY (</u>	OF BIRMIN	<u>IGHAM</u>		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 (C	EMETERY F	RD. & GRAN	D RIVER		Form Required: FORM		Yes	X	No			
City	FOWLERVILLE	State	MI	Zip	48836	Grave Location Required of	on Memorial:	Yes		No	Χ		
Phone	(517) 223-3771					Symbol Required on Memo	orial:	Yes		No	Χ		
Fax	(517) 223-7435					If yes, what symbol?				-			
Contact	CATHY ELLIOTT	Phone	(517) 749-	2506		Benches Permitted: See	note below	Yes	Χ	No			
CEMETER	RY SEXTON - EMAIL celliott@	@fowlerville	o.org			Borders Required on Foun	dation:	Yes		No	Х		
Contact	AMY PETRU, ADMIN Phone	<b>e</b> (517) 223-	3771 Ext. 10	EMAIL apetru@	fowlerville.org								
			Ru	les & Regulation	ons - Installation	Fee							
FLUSH, BE	EVELS, SLANTS & UPRIGHT	MARKERS	ALLOWED.	FOUNDATION I	REQUIRED. MINIMI	UM CHARGE = \$50.00							
FOUNDAT	ION CALCULATION (LENGT	H IN INCHE	S + 2) x (W	IDTH IN INCHES	S + 2) x 30 x \$.03 = 0	COST OF FOUNDATION							
FOR EXA	AMPLE, A 24"x 12" FOUNDA	TION WOUL	D COST \$32	27.60 AND WOU	LD MATCH A 24"x 1	12" BASE							
SECOND	STONES ARE ALLOWED, BU	JT MUST BE	A FLUSH M	OUNT. ON AN	Y GRAVE, 1ST MAR	KER IS SET ON THE							
WALKWA	END AND ANY ADDITIONA	L STONE M	UST BE FLU	JSH MOUNT AT	THE OPPOSITE EN	ID OF THE GRAVE SITE.							
ALL MARK	ER NAMES MUST FACE TH	E ABUTTING	3 WALKING	PATH OR ROAD	DWAY. NO STONE	WORK SHALL BE							
BROUGHT	INTO THE CEMETERY ON	SATURDAY	OR SUNDA	Y. NO FAMILY N	MONUMENT/MARKE	ER MAY SPAN MORE							
THAN 2 GI	RAVES. BENCHES ARE PER	RMITTED IF	THEY TAKE	THE PLACE OF	F A MARKER.		Cemetery 8:00 AM to May thru	9:00 P	M				
MAXIMUM	FOR SINGLE GRAVE MARK	XER = 38" W	IDE				8:00 AM to						
MAXIMUM	FOR DOUBLE GRAVE MARI	KER = NO B	IGGER THA	N 78" WIDE			November	tnru Ap	)rii				
MAXIMUM	FOR BABYLAND GRAVE MA	ARKER = 18	"x 10"										
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	S PER GRAVE: 4	OR 1 FULL AND 2	CREMATION PER GRAVE							
Inctallatio	on Foo Payahla to:					Due date for SPRING face	ndation roc:	octo:					
	on Fee Payable to:					Due date for SPRING fou	nualion requ	<del>6</del> 515.					
VILLAGE	OF FOWLERVILLE					MARCH 15TH							

Due date for FALL foundation requests:

SEPTEMBER 15TH

## <u>GREENWOOD - HADLEY</u>

									1	
Address	4293 PRATT ROAD					Form Required:	Yes		No	Χ
City	HADLEY	State	MI	Zip	48440	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(810) 797-2117					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 797-6026					If yes, what symbol?				
Email	treasurer@hadleytownshi	ip.org				Benches Permitted:	Yes	Χ	No	
Contact	LISA SCHULTZ	Phone	(810) 834-	-9806		Borders Required on Foundation:	Yes	Χ	No	
						2" border on actual size				
			Ru	les & Regulat	tions - Installation	Fee				
FOUNDA	TION FEE:									
.50 PSI										
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMAIN	S PER GRAVE:	: 2 OR 1 FULL AND	1 CREMAINS PER GRAVE				
Installation	on Fee Payable to:					Spring delivery begins (date):				
GREENW	OOD CEMETERY					APRIL 1ST				
P.O. BOX	( 227					Fall/Winter Delivery "cutoff" (date):				
HADLEY,	MI 48440					DECEMBER 1ST				

### **GREENWOOD - VERNON**

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

## **GUARDIAN ANGEL**

									_	
Address	4701 ROCHESTER RD.					Form Required: FORM	Yes	X	No	
City	ROCHESTER	State	MI	Zip	48306	Grave Location Required on Memorial	: Yes		No	Х
Phone	(248) 601-2900					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 601-1711					If yes, what symbol?			-	
Email	dtench@mtelliott.com					Benches Permitted:	Yes	Х	No	
Contact	DAWN TENCH	Phone	(248) 60	1-2900		Borders Required on Foundation:	Yes		No	Χ
			R	ules & Regula	ations - Installatio	n 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	REMATION	MEMORI	ALS - \$800.00						
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRE	MAINS PER G	GRAVE: DEPENDS	S ON LOCATION				
Installatio	on Fee Payable to: C	ash,Checl	۲ &			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	CORNER OF WOOD & CLA	RK RD.					Form Required:	Yes		No	Х
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:		<b>PLEAS</b>	E CAL	L
Contact	CLERK	Phone	(517) 6	68-0270			Borders Required on Foundation:	Yes	Χ	No	
		Fax					2" border required				1
			I	Rules & Re	gulations - In	stallation	Fee				
WEST OF	LANSING										
FOUNDA	TION FEE:										
.50 PSI											
ADD 2" A	ROUND FOR FOUNDATIO	DNS									
Notes:											
											ı
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	WEST SIDE OF HALSEY RI	D. (OFF BA	LDWIN 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	Χ			
Fax	(810)695-0893				If yes, what symbol?		_	7				
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			
			Rı	ules & Regulations - Installation	n Fee							
FLUSH, S	SLANTS, BEVELS & MONU	JMENTS										
FOUNDA	TION FEE:											
.60 PSI, \$	150.00 MINIMUM - Price ir	ncludes the	foundation	n and installation (as of 1-1-25)								
Price is ca	alculated by the size of the	base meau	rement of	the monument.								
Don Simo	ns - <b>SEXTON</b>											
10352 Ha	lsey Rd											
Grand Bla	anc MI 48439-8323											
810-695-0	)433											
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # C	F CREMAIN	NS PER GRAVE: 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, N	/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	Χ
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
			Ru	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**

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

										_	
Address						Form Required:		Yes		No	Х
City	HARTLAND	State	MI	Zip		Grave Location Requi	red 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	<u> </u>	No	
Contact	MIKE WILLENBERG	Phon€	<b>(248)</b> 887-	-6700		Borders Required on F	oundation:	Yes	X	No	
HCM	HURON CEMETERY MA	INTENANC	E			2" boı	der on all sides			-	
			Ru	les & Regulations - In	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - <b>36" MAX PER GR</b>	AVE						
GOVERNI	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	0.00							
FLUSH SE	ETTING OF GRANITE & E	3RONZE OI	N GRANITE	(NO FOUNDATION)							
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDAT	TION FEE FOR MONUME	:NTS & BR(	ONZE ON C	CONCRETE (NON VA)	<u>.</u>						
\$0.70 PSI	OF FOUNDATION, MININ	иUM \$250.0	00								
ALL FOUN	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT	BASE.						
ADD 4" TO	D LENGTH AND WIDTH (	OF BASE TO	O DETERM	IINE FOUNDATION SI	ZE NEEDE	D.					
ADD \$50.0	00 FOR BUILT IN VASE										
MISCELLA	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$125.00									
VASE ON	LY	\$100.00	(ADD \$50.	00 FOR ALL FEES FO	R BUILT IN	N VASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CREN	MATION BURIALS PER	R GRAVE:	2-3					
(C	ALL MIKE @ HURON CEI	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):

#### **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	Χ
Phone	(248) 543-1622					Symbol Required on Memorial:	Yes		No	Χ
Fax	(586) 790-4115					If yes, what symbol? *See below	r		1 1	
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
			Ru	les & Regulati	ions - Installation	Fee				
PERMIT F	REQUIRED FOR DELIVER	Y. GRANI	TE OR BRO	NZE. NO RE	STRICTIONS IN C	OLD SECTION. 36" MAX				
SLANTS I	N SECTIONS 14, 12, 10 A	ND LAKES	IDE.							
SECTION	15,16,17 & 18 ALLOWS S	LANTS OF	R SMALL M	ONUMENTS						
2 lines of	HEBREW, NAME AND DA	ATE OF DE	ATH MUS	T BE ON MEM	IORIAL.					
SMALL M	ONUMENT:									
	TABLET 20"x 8"x up to 28	)"								
	BASE 28"x 12"x 8" SAWN	I FRONT, F	ROCK SIDE	:S						
SLANT M	ARKER:									
	MARKER 24"x 10"x 18"									
	BASE 28"x 12"x 8" SAWN	I FRONT, F	ROCK SIDE	:S						
\$300.00 C	N ALL SINGLE FOUNDAT	TONS INC	LUDES PEI	RMIT FEE						
\$600.00 C	N ALL DOUBLE FOUNDA	TIONS INC	CLUDES PE	RMIT FEE						
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CREI	MAINS PER G	RAVE: 0					
Installatio	on Fee Payable to:					Spring delivery begins (date):				

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

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

										_	
Address	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	Х
Fax	(248) 887-4487					If yes, what symbol?				_	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG		<b>248) 887</b>	-6700		Borders Required on F	oundation:	Yes	Χ	No	
HCM	HURON CEMETERY MA	INTENANO	CE			2" bor	der on all sides				
			Ru	iles & Regulat	ions - Installatior	Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX F	PER GRAVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$25	<u> 60.00</u>							
FLUSH S	ETTING OF GRANITE & B	RONZE O	N GRANITI	E (NO FOUND	ATION)						
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA <sup>*</sup>	TION FEE FOR MONUME	NTS & BR	ONZE ON (	CONCRETE (N	NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00								
ALL FOUI	NDATIONS MUST BE 2" L	ARGER OI	N ALL SIDE	S THAN MON	IUMENT BASE.						
ADD 4" T	O LENGTH AND WIDTH C	OF BASE T	O DETERM	IINE 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 CRE	MATION BURI	ALS PER GRAVE:	2-3					
(C	ALL MIKE @ HURON CEN	METERY M	IAINTENAN	ICE FIRST)							
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begin	ns (date):		_		<u> </u>
HURON C	CEMETERY MAINTENANC	CE CC V	IA PHONE			WEATHER PERMITTI	ING				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

### HIGHLAND/WEST

P.O. BOX 112

HIGHLAND, MI 48357

										1	$\overline{}$
Address	E. SIDE OF S. HICKORY RI	DGE RD. 1	MI.S. OF M	59		Form Required:		Yes		No	Х
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?				7	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @		e (248) 887	7-6700		Borders Required on F	oundation:	Yes	Χ	No	
HCM	HURON CEMETERY MA	INTENANO	CE			2" bord	der on all sides				
			Ru	ules & Regulations - In	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	ΓS, AND M	ONUMEN	TS - 36" MAX PER GRA	AVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYI	PES\$2	<u>50.00</u>							
FLUSH S	ETTING OF GRANITE & B	RONZE O	N GRANIT	E (NO FOUNDATION)							
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA <sup>*</sup>	TION FEE FOR MONUME	NTS & BR	ONZE ON	CONCRETE (NON VA)							
\$0.70 PSI	OF FOUNDATION, MINIM	1UM \$250.	00								
ALL FOUI	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDI	ES THAN MONUMENT	BASE.						
ADD 4" T	O LENGTH AND WIDTH C	F BASE T	O DETER	MINE FOUNDATION SIZ	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	0.00 FOR ALL FEES FO	R BUILT II	N VASE)					
Notes: #	lotes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2-4										
(C	ALL MIKE @ HURON CEN	METERY M	1AINTENAI	NCE FIRST)							
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begin	s (date):				
HURON C	CEMETERY MAINTENANC	E CC V	IA PHONE			WEATHER PERMITTI	NG				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

### <u>HIGHLAND - YPSILANTI</u>

Address	943 NORTH RIVER STRE	EET				Form Required: FORM	Yes	Х	No			
City	YPSILANTI	State	MI	Zip	48198	Grave Location Required on Memori	al: 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		Phone	(734) 482	-9490		Designated areas only	,		_			
	GROUNDS SUPERINTEND	ENT - (734)	678-9867			1" Border Required on Foundation	: Yes	Х	No			
			Ru	iles & Regulat	ions - Installation	Fee						
FOUNDA	TION FEE:											
.75 PSI. (	COST CALCULATED BY B	ASE SIZE	OF MONU	MENT. DO N	OT ROUND TO NE	AREST DOLLAR.						
EXAMPLE	E - 24" x 12" = 288 TOTAL	SQUARE I	NCHES x .	60 = \$172.80								
MAX 36"	36" SINGLE MAX 36" HIGH FOR BOTH FOR CUSTOM SIZES/STYLES											
MAX 60" I	X 36" SINGLE MAX 36" HIGH FOR BOTH  X 60" DOUBLE OVER THAT LISTED CAN BE MADE ON											
				COMPANI	ON GRAVESIT	ES (2) CONTACT FIRST						
IE CONFI	RMED VETERAN, THERE	IS A 10%	DISCOUNT	T ON FOUND	ATION FEES							
001411	MILD VETERAN, ITIERE	10 A 10/0	Dioooditi	i Oit i OoitDr	ATION I LLO							
Natas: 0	NII V 4 ELII L DUDIAL DED OF	24VE OD 4	ELILL AND I	ID TO 0 ODEM		LL OWED						
Notes: O	NLY 1 FULL BURIAL PER GF	RAVE OR 1	FULL AND (	JP TO Z CREINI	AINS PER GRAVE P	LLOWED						
Installatio	on Fee Payable to:					Spring delivery begins (date):						
	_	ION				APPROXIMATELY APRIL 25TH						
	D CEMETERY ASSOCIAT	ION										
(SAME AL	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date)						
						APPROXIMATELY NOVEMBER 1S	Ī					

### 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	Χ
Fax	(734) 697-6837					If yes, what symbol?				
Email	clerk@belleville.mi.us					Benches Permitted:	Yes	Х	No	
Contact	BRIAN HOOTMAN	Phone	(734) 697-	9323 Ext. 701	0	Borders Required on Foundation:	Yes		No	Х
						*See note below for speci	ficatio	ns		
			Rul	es & Regulati	ions - Installation	Fee				
FLUSH, E	BEVELS, SLANTS AND MO	NUMENTS	8			Cash, Check and Credit Card in office				
34" MAX	FOR SINGLE									
FOUNDA	TION FEE: 1.00 PSI									
Cash, Che	ck and Credit Card in office	e								
2019 last	fall foundation order on F	riday, Au	gust 23rd							
Notes: #	OF FULL BURIALS PER C	RAVE 1 #	OF CREM	ATION BURIA	LS PER GRAVE:	4				
Installation	on Fee Payable to: Cash/C	heck & C	C in office			Spring delivery begins (date):				
CITY OF	BELLEVILLE - ATTN: BRIA	N HOOTM	AN			WEATHER PERMITTING Usually May	or June	е		
6 MAIN S	TREET					Fall/Winter Delivery "cutoff" (date):				

WEATHER PERMITTING Usually October

## HILLSIDE - ST. CLAIR

Address	CORNER OF PALMER 8	& ST. CLAII	RHWY			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 & Re	gulations - Installatio	on Fee				
FLUSH, B	EVELS, SLANTS AND M	ONUMENT								
	ΓΙΟΝ FEE:									
	 C FOOT - \$120.00 MINIM	IUM								
·	·									
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF C	REMAINS P	ER GRAVE: 2					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	ST. CLAIR					MAY 1ST				
547 N. CA	RNEY 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	Х
				Rules & Reg	julations - Installa	ation Fee			
FLUSH O	NLY								
FOUNDA	TION FEE:								
24"x 12"x	4" - (LARGEST # x 1.5	60 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			
Installation	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?		<b>-</b> ,	
Email						Benches Permitted: Call for approval	Yes	No	
Contact	KRISTA WERNER	Email	krista.	werner@historic-v	woodlawn.com	Borders Required on Foundation:	Yes	No	Χ
				Rules & Regulat	tions - 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						rail/winter benvery cuton (date):			

## **HODGE**

HIGHLAND, MI 48357

										1				
Address	ON FENTON RD., JUST	NORTH O	F CLYDE F	RD.		Form Required:		Yes		No	Х			
City	HARTLAND	State	MI	Zip		Grave Location Requir	red 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		<b>e</b> (248) 887	7-6700		Borders Required on F	oundation:	Yes	Х	No				
НСМ	HURON CEMETERY MA	INTENANO	CE			2" bor	der on all sides							
			Rı	ules & Regulations - Ins	stallation	Fee								
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	IONUMEN <sup>-</sup>	TS - 36" MAX PER GRA	VE									
GOVERN	MENT ISSUED MARKERS	S - ALL TYI	PES\$2	<u>50.00</u>		TALK TO								
FLUSH S	ETTING OF GRANITE & B	RONZE O	N GRANIT	E (NO FOUNDATION)		LARRY AT								
\$0.50 PSI	, MINIMUM \$175.00					TOWNSHIP:								
FOUNDA <sup>*</sup>	TION FEE FOR MONUME	NTS & BR	ONZE ON	CONCRETE (NON VA)			810-632-7	7498						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00											
ALL FOUI	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDI	ES THAN MONUMENT E	BASE.									
ADD 4" T	O LENGTH AND WIDTH C	OF BASE T	O DETERI	MINE FOUNDATION SIZ	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	0.00 FOR ALL FEES FOR	R BUILT I	N VASE)								
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRE	MATION BURIALS PER	GRAVE:	2-3								
(CALL MIKE @ HURON CEMETERY MAINTENANCE FIRST)														
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begin	ns (date):							
HURON (	EMETERY MAINTENANC	CE <u>CC V</u>	IA PHONE		WEATHER PERMITT	ING								
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	X	No	
City	DETROIT	State	MI	Zip	48209		Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(734) 285-2155 (734) 285-6510						Symbol Required on Memorial:  If yes, what symbol?	Yes		No	Χ
Email	mariles.lori@aodcemeteri	ies.ora					Benches Permitted:	Yes	Х	No	
	LORI MARILES	Phone	(734) 28	)5 2155			Borders Required on Foundation:	Yes		No	X
Comaci	LONIWANILES	riione	(734) 20	100			Borders Required on Foundation.	165		Tivo	
			R	ules & Reg	gulations - Ins	tallation	Fee				
ONLY GR	ANITE MARKERS ALLOW	/ED. MUS	T BE APP	PROVED BY	Y CEMETERY.	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 ADDITI	ONAL LOT	UPGRADE F	EE:					
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										
Natar #	OF FULL BUIDIAL C DED (		" OF FU	II DUDIAL		E DEDTI	LODAVE. O				
	OF FULL BURIALS PER (		# OF FUL	LL BURIALS	S PER DOUBL	E DEPTE	1 GRAVE: 2				
# (	OF CREMAINS PER GRAV	/E: 5									
Inctallatio	on Foo Boyoble to: HOLV	CBOSS C	EMETED			ſ	Spring delivery begins (deta):				
	on Fee Payable to: <u>HOLY</u>	CKUSS C	<u> </u>	L			Spring delivery begins (date):				
MAIL IO:	OUR LADY OF HOPE						APRIL 1ST				

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST

#### HOLY SEPULCHRE

(SAME ADDRESS AS ABOVE)

Address	25800 W. TEN MILE RD.					Form Required: FORM	Yes	Х	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	Χ
			Du	ulas & Pagulati	ions - Installation	Eoo				
				•						
			•			LOWED ON 1 GRAVE. SECTION 37 IS				
MONUME	NTS MONUMENTS 2 GR	AVES: 36":	x 8"x 28" T	ABLET, 48"x14	1"x 8" BASE. 4 GR	AVES: 48"x 8"x 28" TABLET, 60"x 14"x	8" BAS	SE.		
MONUME	NTS IN OTHER SECTION	S: NO TAI	LER THA	N 7' AND MUS	T BE APPROVED	BY CEMETERY.				
STAINLES	SS STEEL AND LASER PH	OTOS ALI	OWED. N	NO SLANTS, H	ALF LEDGERS O	R FULL LEDGERS ALLOWED. 2 SINGL	E MAF	RKERS	;	
ALLOWE	O ON 1 GRAVE. <b>ALL MON</b>	UMENT A	ND DESIG	N NEED PRIO	R APPROVAL FR	OM CEMETERY.				
16"x 10"x	4" - \$300.00 INFANT									
24"x 12"x	4" - \$475.00		UPRIGHT	Γ MARKERS AI	RE SUBJECT TO	AN ADDITIONAL PER-GRAVE LOT UP	GRADI	E FEE.		
48"x 12"x	4" - \$630.00		FAMILIES	S REQUIRE AF	PPROVAL FROM (	CEMETERY BEFORE PURCHASING A	N UPR	IGHT I	MARK	ER.
BENCH F	OUNDATION - \$1050.00									
SINGLE N	MONUMENT FOUNDATION	N - \$500.00	)	SETTING FE	E IS DUE 2 WEEK	S PRIOR TO MARKER DELIVERY				
2 GRAVE	MONUMENT FOUNDATIO	N - \$1,125	5.00	CEMETERY WIL	L ONLY ACCEPT FUI	L PAYMENT ON MARKERS AND MONUMENTS	<b>3</b> .			
4 GRAVE	MONUMENT FOUNDATIO	N - \$1,375	5.00							
MONUME	NTS GREATER THAN TH	AN 5' - \$25	0.00 PER	LINEAR FOOT	-					
Notes: #	OF FULL BURIALS PER C	GRAVE: 1	# OF CRE	EMAINS PER G	GRAVE: 2					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
HOLY SE	PULCHRE CEMETERY					APRIL 1ST				

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 1ST

## HOWELL MEMORIAL CEMETERY

Address	1410 WEST HIGHLAND	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	Х
Fax	(517) 546-6019					If yes, what symbol?			
Email	dwylie@cityofhowell.org					Benches Permitted:	Yes	No	Х
Contact	DAVE WYLIE	Cell 517 4	04 2526			Borders Required on Foundation:	Yes	No	Х
		Office 517	546 4500						
			Ru	les & Regulat	ions - Installation	Fee			
GRANITE	OR BRONZE. FLUSH, B	EVELS, SL	ANTS AND	MONUMENT	S SHALL NOT BE	SMALLER THAN			
16"x 8" IN	BASE SIZE NOR SHALL	THEY EXC	CEED 40" IN	NLENGTH FO	R SINGLE AND C	OMPANIONBURIAL SPACE,			
FOUNDA	TION FEE:								
.40 PSI, MINIMUM \$70.00									
NO BENC	CHES ALLOWED!								
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRE	MAINS PER G	SRAVE: 2				
Installatio	on Fee Payable to:					Spring delivery begins (date):			
CITY OF	HOWELL - ATTN: Dave W	/ylie				VARIES - PLEASE CALL			
611 EAST	GRAND RIVER					Fall/Winter Delivery "cutoff" (date):			
HOWELL, MI 48843 VARIES - PLEASE CALL									

# HURON VALLEY

Address	P.O. BOX 1021-HURON	RIVER DR. W.	. OF TELI	EGRAPH		Form Required:	Yes		No	Х		
City	FLAT ROCK	State	MI	Zip	48134	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(734) 782-9415					Symbol Required on Memorial:	Yes		No	Χ		
Fax	N/A					If yes, what symbol?						
Email						Benches Permitted:	Yes	Х	No			
Contact		Phone	(734) 7	782-9415		Borders Required on Foundation:	Yes		No	Χ		
				Rules & Reg	ulations - Installa	tion Fee						
FLUSH, E	BEVELS, SLANTS AND	MONUMENT	S									
FOUNDA	TION FEE:											
1.00 PSI -	- ANY SIZE											
24"x 12" -	\$288.00											
Notes: #	OF FULL BURIALS PER G	SRAVE: 1 # OF	- CREMA	INS PER GRA	VE: 2 OR 1 FULL AN	ID 1 CREMATION PER GRAVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):						
DARIN M	cLESKY					WEATHER PERMITTING						
27330 WEST HURON RIVER DR.				Fall/Winter Delivery "cutoff" (date):								
FLAT ROCK, MI 48134					WEATHER PERMITTING							

#### **KENSINGTON**

P.O. BOX 112

HIGHLAND, MI 48357

									_	1	
Address	GRAND RIVER & KENSII	NGTON RE	<b>D</b> .			Form Required:		Yes		No	Х
City	KENT LAKE	State	MI	Zip		Grave Location Require	ed 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		(248) 887	7-6700		Borders Required on Fo	oundation:	Yes	Χ	No	
HCM	HURON CEMETERY MA	INTENANC	CE			2" bore	der on all sides				
			Rı	ules & Regulations - In	stallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	ΓS, AND M	ONUMEN <sup>-</sup>	TS - 36" MAX PER GRA	AVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYF	PES\$2	<u>50.00</u>							
FLUSH SI	ETTING OF GRANITE & B	RONZE OI	N GRANIT	E (NO FOUNDATION)							
\$0.50 PSI	0.50 PSI, MINIMUM \$175.00										
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON	CONCRETE (NON VA)	_						
\$0.70 PSI	OF FOUNDATION, MINIM	ИUM \$250.0	00								
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDI	ES THAN MONUMENT	BASE.						
ADD 4" TO	O LENGTH AND WIDTH C	F BASE T	O DETERI	MINE 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	0.00 FOR ALL FEES FO	R BUILT II	N VASE)					
Notes: #	Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2										
(C	ALL MIKE @ HURON CEN	METERY M	IAINTENAI	NCE FIRST)							
					,						
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begins	s (date):				
HURON C	EMETERY MAINTENANC	CE <u>CC V</u>	IA PHONE			WEATHER PERMITTIN	NG				

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

# **KINNEY**

Address	ddress ACROSS FROM 3350 EAST VINCENT RI					Form Required:	Yes		No	Х		
City	NORTH STREET	State	MI	Zip	48049	Grave Location Required on Memorial:	Yes	Х	No			
Phone Fax	(810) 985-7258 (810) 985-3065					Symbol Required on Memorial:  If yes, what symbol?	Yes		No	Χ		
Contact	STACEY SMITH (CLERK)		Phone	(810) 985	-7258	Benches Permitted:	Yes		No	Х		
	DREW SAUNDERS (SEXTO	ON)	Phone	(810) 985		Borders Required on Foundation:	Yes	Х	No			
	JEFF KERN (SUPERVISOR	R)	Phone	(810) 985		2" border required (included in p	rice)		-			
	CATHY JOWETT (SECRET	ARY)	Email	cathyj@c	lydetownshipscc.org		·					
			Rı	ules & Reg	ulations - Installatio	n Fee						
FLUSH, B	EVELS, SLANTS AND	MONUMEN	ſS.									
•	TION FEE:											
	11NIMUM \$120.00 FOR	UP TO 10" x	24"									
24"x 12" -												
	(1) monument, marker,	or memorial	shall be per	mitted per b	ourial space "above d	rade" Any other military						
•	arker must be flush or b		orian bo por	mitou por c	and opace above g	ado 7 my cure. Immary						
or odorrin	arker mack be mader or b	olow grado.										
IE A HEAI	DSTONE SHOWS UP V	WITHOUT A	FOLINDATI	ON A \$50	N FINE WILL BE ISS	IIEDI						
II AIIEA	DOTONE SHOWS OF V	MINOUT A	CONDAIL	OI4 A \$500	OT INC WILL BE 100	OLD:						
Notes: #	OF FULL BURIALS PER (	GRAVE: 1 #	OF CREMAIN	NS PER GRA	AVE: 4 OR 1 FULL AND	1 CREMATION PER GRAVE						
	on Fee Payable to:					Spring delivery begins (date): April 1	.5					
CLYDE T	OWNSHIP					WEATHER PERMITTING						
3350 VIN	CENT ROAD					Fall/Winter Delivery "cutoff" (date): I	lov 15	I.				
NORTH STREET, MI 48049						WEATHER PERMITTING	WEATHER PERMITTING					

#### KNOLLWOOD MEMORIAL PARK

Address	1299 RIDGE RD.					Forms Required: F	ORMS	Yes	Х	No	
City	CANTON	State	MI	Zip	48187	Grave Location Requ				No	Х
Phone	(734) 495-0400	Otato	IVII	-ib	40107	Symbol Required on		Yes		No	X
Fax	(734) 495-1290					If yes, what symbol		163		1110	
Email	knollwoodmemorial@gma	il.com				Benches Permitted:		Yes	Х	No	
Camtaat	DENINIC LIEDMAN	Dhana	(704) 405	0.400			•			1	
Contact	DENNIS HERMAN Denise	Phone	(734) 495	-0400		Borders Required or	Poundation:  2" border required	Yes	Χ	No	
				ulas Pagulati	ana Installation	Foo	2 border required	<u> </u>			
			Ru	iles & Regulati	ons - Installation	ree					
GRANITE	AND BRONZE. BRONZE	MUST BE	MOUNTE	D ON GRANITE	BEFORE DELIV	ERY TO CEMETERY	•				
ANY COL	OR GRANITE BRONZE BA	ASE ALLO	VED								
NO BEVELS OR SLANTS. CALL BRAD BOUCHIE (734) 274-7422											
INSTALLA	ATION FEES:					FOR FOUNDATIO	NS				
24"x 12" A	ND 24"x 14" - \$350.00 GR	ANITE									
ALL COMI	PANIONS - \$700.00										
MINIMUM	SINGLE 24"x 12", MINIMU	ЈМ СОМРА	NION 36">	x 12". DOUBLE	INTERMENT 16	"x 24". BRONZE	PET MEM	IORIAL	<u>.s</u>		
MARKERS	S, GRANITE MONUMENTS	S AND BE	ICHES NE	ED APPROVA	L.		10"x 4" - \$	225.00	ı		
CALL CEN	METERY FOR CERTAIN R	ESTRICTION	ONS.				12" x 6" - 3	\$250.00	)		
LEDGERS	BENCHES, MONUMENT	- \$1.25 PS	SI				16"x 8" - \$	275.00			
MUSLIM S	<b>SECTION</b> - \$375.00						20"x 10" -	\$300.0	0		
16"x 4"x 1	8"	USE BEN	CH BASE	AS FOUNDAT	ION		24"x 10" -	\$325.0	0		
24"x 8"x 4	п	CAN BE F	ROCK SIDI	ES OR SAWN	SIDES						
Notes: FO	OR # OF FULL BURIALS F	ER GRAV	E AND # O	F CREMAINS	PER GRAVE: CAI	L OFFICE					

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

CASH, CHECK

**CC VIA PHONE** 

Installation Fee Payable to:

KNOLLWOOD MEMORIAL PARK

Spring delivery begins (date):
WEATHER PERMITTING
Fall/Winter Delivery "cutoff" (date):
NONE

#### LAKESIDE - HOLLY

									1	
Address	860 THOMAS ST.					Form Required:	Yes		No	Х
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	iles & Regulat	ions - Installatior	Fee				
FLUSH, E	BEVELS, SLANTS AND MC	NUMENT:	S							
FOUNDA	TION FEE:									
.50 PSI, N	 /INIMUM \$150.00									
INFANT -	\$150.00									
24"x 12"x	4" - \$150.00									
	IZE - \$150.00									
	•									
Notes: #	OF FULL BURIALS PER GRA	۸\/E·1 # C	E CDEMAIN	IS DED CDAVE	· 2 OP 1 FIII AND	1 CREMATION REP CRAVE				
HOICS. #	OF TOLL BORNALOT ER GRO	AVE. I #C	OKEWAII	IOT ER ORAVE.	2 OK TTOLL AND	TOREWATION FER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
VILLAGE	OF HOLLY - DPW	(248) 634	-2202			APRIL 1ST				
201 ELM	STREET					Fall/Winter Delivery "cutoff" (date):				
HOLLY, N	/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	Х
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	MINIMUN	1							
Notes: "	05 5111 BUDIAL	N/E 4 # 05	- 00=1441110	N DED OD 4) /E	4.00 4.500	ODEMANO DED ODAVE				
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAINS	PER GRAVE:	4 OR 1 FULL AND 3	CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
TOM LLO	-						(C)			
						MAY 1ST OR (WEATHER PERMITTIN	G)			
	RMANN DR.					Fall/Winter Delivery "cutoff" (date):				
ROANE C	ITY, MI 49712					WEATHER PERMITTING				

#### LAKESIDE - PORT HURON

100 McMORRAN BLVD. PORT HURON, MI 48060

									 _	
Address	3663 10TH AVENUE						Form Required:	Yes	No	Х
City	PORT HURON	State	MI	Zip	48060		Grave Location Required on Memorial:	Yes	No	Х
Phone	(810) 984-9725						Symbol Required on Memorial:	Yes	No	Х
Fax	(810) 982-7872						If yes, what symbol?		 7	
Email	kristont@porthuron.org						Benches Permitted:	Yes	No	Х
Contact	TOM KRISTON Elizabeth	Phone	(810) 98	7-6000			Borders Required on Foundation:	Yes	No	Х
			R	ules & Reg	ulations - Inst	allation	Fee			
FLUSH, B	EVELS, SLANTS AND MC	NUMENT:	S.							
ALL MEM	ORIALS AND MONUMEN	TS MUST I	HAVE CEN	METERY AF	PPROVAL.					
FOUNDA	TION FEE:									
.60 PSI, \$	160.00 MINIMUM									
MARKERS										
SINGLE	LENGTH NO MORE THA	N 30" - WI	DTH NO N	MORE THAI	N 12" - HEIGH	T NO MC	RE THAN 30"			
DOUBLE	LENGTH NO MORE THA	N 60" - WI	DTH NO N	MORE THAI	N 12" - HEIGH	T NO MC	RE THAN 30"			
FLUSH	LENGTH 24" OR LESS -	WIDTH 12	" OR LESS	S - FLUSH I	HEIGHT					
BABYLAN	D SECTION - LENGTH 16"	OR LESS	- WIDTH 8	B" OR LESS	- FLUSH HEIG	3HT				
VETERAN	S' SECTION - LENGTH ANI	D WIDTH I	DETERMIN	NED BY U.S	S. GOVT FLU	JSH HEIG	BHT			
BASES F	OR SINGLE AND DOUBL	E MARKEI	RS - NO M	ORE THAN	N 8" HIGH AND	14" WID	E			
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # 0	OF CREMA	INS PER GR	AVE: 4					
(	OR 1 FULL AND 2 CREMATION	ONS PER G	RAVE							
						г				1
Installatio	on Fee Payable to:						Spring delivery begins (date):			
CITY OF	PORT HURON - CITY CLE	RK'S OFF	ICE				YEAR ROUND DELIVERY			

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	1				
Email	cstrachan@indtwp.com					Benches Permitted: With permission	Yes	Χ	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	FLUSH, BEVELS, SLANTS. NO HEIGHT RESTRICTIONS. NO LARGER THAN 30" WIDE 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 CRE	MAINS WITH A M	ONUMENT							
Note:	ONLY 1 ADULT BURIAL A	ND 1 CREI	MATION MA	AY BE PLACE	D IN A SINGLE G	RAVE, OR 2							
	CREMAINS IN A SINGLE	GRAVE, U	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 ARI	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	$\underline{dprince@cityofhowell.org}$					Benches Permitted:	Yes	No	Χ
Contact	Dan Prince	Office 517	7 546 4500			Borders Required on Foundation:	Yes	No	Χ
			Ru	les & Regulati	ons - Installation	Fee			
GRANITE	OR BRONZE. FLUSH, BE	EVELS, SL		_					
						OMPANION BURIAL SPACE, 90" IN			
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								
NO BENC	HES ALLOWED!								
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE			
									1
	on Fee Payable to:					Spring delivery begins (date):			
	HOWELL - ATTN: Dan Pri	nce				VARIES - PLEASE CALL			
611 EAST	GRAND RIVER					Fall/Winter Delivery "cutoff" (date):			
HOWELL	MI 48843					VARIES - PLEASE CALL			

#### LAKEVIEW (WHITMORE LAKE)

Address	9 MILE ROAD AND EAST	SHORE D	RIVE			Form Required:	Yes		No	Х				
City	WHITMORE LAKE	State	MI	Zip	48189	Grave Location Required on Memorial:	Yes	Χ	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	Χ	No					
Contact	MICHAEL SEDLAK	Phone	(810) 231-	1333		Borders Required on Foundation:	Yes	Χ	No					
	TOWNSHIP CLERKS DEPT.					2" border required								
	Rules & Regulations - Installation Fee													
FOUNDA <sup>-</sup>	ΓΙΟΝ FEE:													
24"x 12" -	\$250.00	28" X 16"	- \$250.00											
36"x 12" -	\$290.00	40" X 16"	- \$350.00											
48"x 12" -	\$390.00	48" X 16"	- \$450.00											
CREMATI	ON BURIAL VAULT - \$275	5.00												
ODD SIZE	ED FOUNDATIONS USE .6	0 PSI.												
**CALL CI	LERKS OFFICE BEFORE I	DELIVERY	SO GRAVE	E CAN BE STA	AKED									
Notes: #	OF FULL BURIALS PER GRA	VE1 #OF	CREMAINS	PER GRAVE: 2	2 OR 1 FULL AND	CREMATION PER GRAVE								
										•				
Installatio	on Fee Payable to:					Spring delivery begins (date):								
GREEN C	AK CHARTER TOWNSHIP	<b>&gt;</b>				WEATHER PERMITTING								
10001 SIL	VER LAKE RD.					Fall/Winter Delivery "cutoff" (date):								
BRIGHTO	N, MI 48116					WEATHER PERMITTING								

# **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	(248) 628-3317					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 628-2207					If yes, what symbol?				
Email	pbennett@addisontwp.org	-				Benches Permitted:	Yes		No	Х
Contact	PAULINE BENNETT, CLERK	Phone	248-628- ext 216	5409		Borders Required on Foundation:	Yes		No	Х
			Rı	ıles & Regula	tions - Installation	Fee				
FLUSH, B	EVELS, SLANTS, AND MO	NUMENT	S. MONU	MENTS MUST	Γ BE LESS THAN 4	'TALL.				
FOUNDA	TION FEE:									
12"x 12" -	\$150.00									
24"x 12" -	\$200.00									
36"x 12" -	\$250.00									
48"x 12" -	\$300.00									
COMPLE.	TED CEMETERY FOUNDA	TION FOR	RM REQUI	RED BEFORE	INSTALL					
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN	NS PER GRAVE	: 2 OR 1 FULL AND	1 CREMATION PER GRAVE				
_										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ADDISON	TOWNSHIP					WEATHER PERMITTING				
1440 ROC	CHESTER ROAD					Fall/Winter Delivery "cutoff" (date):				
LEONARI	D, MI 48367					WEATHER PERMITTING				

# <u>LAPHAM</u>

Address BROOKVILLE AND GODERDSON RD.						F	V	· ·	١	
						Form Required: FORM	Yes		No	
City	SALEM	State	MI	Zip		Grave Location Required on Memorial:	Yes		No	X
Phone	(734) 453-6049					Symbol Required on Memorial:	Yes		No	Χ
Fax	N/A					If yes, what symbol?			1	
Email	michaelcolemjc@outlook.c	<u>com</u>				Benches Permitted:	Yes	Х	No	
Contact	MICHAEL COLE	Phone	(734) 223-	7923		Borders Required on Foundation:	Yes		No	Χ
			Rui	les & Regulations - I	nstallation	Fee				
INCH ME	MORIALS TO DO FOUNDA	ATION/INS	TALLATION	Ν.						
MUST CA	ALL MICHAEL COLE AT LE	AST 3 DA	YS BEFORI	E DELIVERY TO STA	KE GRAVE	<u>.</u>				
,										
1										
1										
ı										
ı										
ı										
Notes: #	OF FULL BURIALS PER GRA	VE: # OF	CREMAINS	S PER GRAVE: OR I	FULL AND	CREMATION PER GRAVE				
					7					
Installati	on Fee Payable to:					Spring delivery begins (date):				
INCH ME	MORIALS					WEATHER PERMITTING				
580 SOU	TH MAIN					Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167					WEATHER PERMITTING				

# LELAND CEMETERY

Address	Idress 6000 EARHART RD OFF N. TERRITORIAL					Form Required:			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 & Regulatio	ons - Installation	Fee					
.60 PSI - MINIMUM \$175.00											
Notes:											
Installation	on Fee Payable to:					Spring delivery begins (date):					
BILL WAG	GNER					WEATHER PERMITTING					
3647 EAST NORTHFIELD CHURCH						Fall/Winter Delivery "cutoff" (date):					
ANN ARE	OR. MI 48105					WEATHER PERMITTING					

#### LINCOLN MEMORIAL PARK

Address	21661 E. FOURTEEN MII	LE ROAD				Form Required: FORM	Yes	Χ	No				
City	CLINTON TOWNSHIP	State	MI	Zip	48035	Grave Location Required on Memorial:	Yes		No	Χ			
Phone	(586) 791-3486					Symbol Required on Memorial:	Yes		No	Χ			
Fax	(586) 329-6835					If yes, what symbol?							
Email	LMPCC1928@GMAIL.CC	<u>M</u>				Benches Permitted:	Yes		No	Χ			
Contact	CLERK AT OFFICE	Phone	(586) 791-	3486		Borders Required on Foundation:	Yes		No	Χ			
						MUST HAVE PENCIL ROUNDED EDG	E						
Rules & Regulations - Installation Fee													
FLUSH (SAWN SIDES ONLY) BRONZE/GRANITE. ALL HEADSTONES MINIMUM 4" THICK. BRONZE MUST HAVE GRANITE BASE, NO VASES.													
ANY COLOR GRANITE BRONZE BASES ALLOWED. PHOTO MARKERS MUST HAVE A DISCLAIMER FORM AND MUST BE NOTARIZED.													
FLUSH MEMORIALS ONLY! NOTE: CANNOT DELIVER FOR 6 MONTHS AFTER THE BURIAL.													
INSTALLATION FEE MUST ACCOMPANY THE MARKER. NO PRE-PAYMENTS													
HALF LEDGERS AND FULL LEDGERS NOT ACCEPTED.													
16X8X4 <b>INFANT</b> - \$500.00 24X12X4 <b>VA</b> - \$650.00													
24"x 12" GRANITE - \$750.00 (1 NAME ONLY), \$1000.00 (2 NAMES ON MARKER)													
36"x 12"x 4" COMPANION GRANITE (MAXIMUM SIZE) = \$1100.00													
24"x 12" BRONZE MOUNTED ON 28"x 16" GRANITE BASE - \$850.00													
28"x 16" - \$850.00													
16"x 24" BRONZE LAWNCRYPT WITH 20"x 28" GRANITE BASE - \$1000.00													
31"x 10" C	OR 36"x 12" COMPANION	- \$1100.00		ALL PRICES	SUBJECT TO CH	ANGE.							
Notes: Allow 2 weeks after delivery of memorial for setting stone by cemetery weather permitting													
No headstones accepted on Saturdays!													

Installation Fee Payable to: MUST BE COMPANY CHECK

LINCOLN MEMORIAL PARK

(SAME ADDRESS AS ABOVE)

Spring delivery begins (date): APRIL 16TH

NO DELIVERIES 1 WK BEFORE MOTHER'S DAY

Fall/Winter Delivery "cutoff" (date): NOV. 15TH

NO DELIVERIES 1 WK BEFORE MEMORIAL DAY

# **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	<del>)</del>			Borders Required on Foundation:	Yes	Х	No	
						2" border on all sides				
				Rules & Re	gulations - Installat	ion Fee				
BRONZE	, FLUSH GRANITE, S	SLANTS, AND M	IONUME	ENTS - 30" M	AX PER GRAVE	INCH ME	MORIA	ALS		
GOVERN	MENT ISSUED MAR	KERS - ALL TYI	PES	<u>\$250.00</u>		WILL INS	TALL			
FLUSH S	ETTING OF GRANIT	E & BRONZE O	N GRAN	NITE (NO FO	UNDATION)	FOUNDA	TIONS			
	NDATIONS MUST BE O LENGTH AND WIE									
	OF FULL BURIALS I				BURIALS PER GRAV					
installatio	on ree Payable to:		SH, CHE			Spring delivery begins (date):				
		<u>CC                                   </u>	VIA PHO	<u> </u>		WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

#### LOVEDALE MEMORIAL

Address	5175 E. BRISTOL ROA	νD				Form Required:	Yes	Х	No	
City	BURTON	State	MI	Zip	48519	Grave Location Required on Memorial:	Yes		No	Χ
Phone Fax	(810) 694-4101 (810) 694-9481					Symbol Required on Memorial:  If yes, what symbol?	Yes		No	Х
Email	cfirman@covenantcem	etery.com	EMAIL	GOOD UNTII	APRIL 1, 2025	Benches Permitted: Designated areas	 Yes	Х	No	
Contact	CATHY FIRMAN AT CRESTWOOD (ON	Phone ILY UNTIL A	` ,	694-4101 2025)		Borders Required on Foundation:	Yes		No	Х
				Rules & Re	gulations - Installati	on Fee				
FLUSH G	RANITE (SAWN SIDES)	), BEVELS, \$	SLANTS							
MONUME	NTS (IN DESIGNATED	AREAS). P	LEASE C	CALL.						
	TION FEE: LINEAR INCH									
Notes: #	OF FULL BURIALS PER G	RAVE: 1 # C	F CREM	AINS PER GF	AVE: 2 OR 1 FULL AN	D 1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:	CASH, C	HECK_			Spring delivery begins (date):				
LOVEDAL	E MEMORIAL CEMETE	RY				YEAR ROUND (CALL FIRST)				
2020 EAS	T HILL ROAD					Fall/Winter Delivery "cutoff" (date):				
GRAND 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	Χ
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
				Pulso 9 Dagul	otiono Inotollatio	n Faa				
				_	ations - Installatio					
,	•					RIFY. PHOTO MEMORIALS				
		REMATION GAI	<u>RDENS</u> MU	JST NOT EXCE	ED <b>16"x 9"x 4"AND</b>	MUST BE SAWN SIDES.				
	TION FEE:									
1.50 PSI I	PLUS PERMIT FEE OF	= \$50.00 (SINC	GLE), \$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	T FEE:						
16"x 8" - 9	\$450.00					Drawing of memorial must be submi	tted_			
18"x 10" -	\$450.00					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 #	OF CREMA	ATION BURIALS	PER GRAVE: 1					
										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	Χ
City	FLINT	State	MI	Zip	48506	Grave Location Required on Memorial:	Yes	No	Χ
Phone	(810) 516-7957 (Judy - m	obile)				Symbol Required on Memorial:	Yes	No	Χ
Fax	N/A					If yes, what symbol?			
Email	annsalti@gmail.com					Benches Permitted:	Yes	No	
Contact	CAROL HURAND and JUDY KASLE	Phone	(810) 694- (810) 240-			Borders Required on Foundation:	Yes	No	
			Ru	les & Regulati	ions - Installation	Fee			
СЕМЕТЕ	RY IS NO LONGER INVOL	_VED IN Th	HE SELLING	OR INSTALL	ATION OF FOUN	DATIONS.			
СЕМЕТЕ	RY IS ADVISING FAMILIES	S TO PUR	CHASE FOI	JNDATION DI	RECTLY FROM C	OMPANY INSTALLING THE MONUMEI	NT.		
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # (	OF CREMAT	ION BURIALS F	PER GRAVE: 1				
Installatio	on Fee Payable to:	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

Address	415 SOUTH OBSERVATO	ORY				Form Required:	Yes		No	Х
City	CLINTON	State	MI	Zip	49236	Grave Location Required on Memorial:	Yes		No	Χ
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				
			Rul	les & Regulati	ons - Installation	Fee				
BRONZE,	FLUSH GRANITE, SLANT	S, BEVEL	S, AND MO	NUMENTS						
FOUNDA	TION FEE:									
.65 PSI, N	11NIMUM \$200.00									
ALL BASE	L BASES FOR MONUMENTS MUST BE NO LONGER THAN 34" ON A SINGLE GRAVE									
**	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.				
Natao # 4		VE 4 " O	- 00=1441110	DED ODAVE	000451111 4ND 4	ODEMATION DED ODANG				
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: Z	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
In atalleti	on Eas Dayable to: CACII	CHECKS	DNI V			Spring delivery begins (date):				
	on Fee Payable to: <u>CASH</u>	CHECKS (	JINL T			Spring delivery begins (date):				
BRAD BC						WEATHER PERMITTING				
	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	CLINTON, MI 49236 OCTOBER 1ST									

#### MAPLE GROVE

									1	
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	Х
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 - Installation	Fee				
FLUSH, E	BEVELS, SLANTS AND MC	NUMENT:	S IN DESIG	NATED AREA	S. SECTION 5 IS	FLUSH ONLY.				
NO POR	CELAIN OR CERAMIC PHO	OTOS/TILE	S ON FLU	SH MARKERS	ONLY. ETCHED	OR ENGRAVED IS				
ACCEPTA	EPTABLE.									
FLUSH M	MARKER INSTALLATION FEE: \$1.10 per square inch IMG - PART OF MAPLE GROVE									
24"x 12" -	\$316.80					ISLAMIC SECTION				
44"x 14" -	\$677.60									
FULL LE	OGER 30"x 72" - \$1200.00									
UPRIGHT	MONUMENT INSTALLAT	ION FEE:								
\$1.10 PS	- MINIMUM FOUNDATION	N PREP FE	EE \$250.00							
			·							
Notes: #	OF FULL BURIALS PER GRA	AVF: # 0	F CREMAINS	S PER GRAVE	OR FULL AND	CREMATION PER GRAVE				
	S SZE BOKINES I EK OK		O CALLER WAY	O V L.	3.1 / GLE / HVD					
Installation	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:	ľ		No	Х
Phone	734-439-5660					Symbol Required on Memorial:	Yes		No	Х
Fax	734-439-5660					If yes, what symbol?				
Email	info@marbleparkcemeter	y.com				Benches Permitted:	Yes		No	
Contact	JON VESPER	Phone	734-645-4	795		Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulat	ions - Installation	Fee				
FLUSH, B	EVELS, SLANTS AND MC	NUMENTS	S. CALL FO	R REGULATION	ONS					
\$150.00 N	IINIMUM AND ALL VA									
.65 PSI 24	1x12x4= \$187.20									
<u>Delivery</u>	early morning till noon									
Notes: #	OF FULL BURIALS PER GRA	AVE 1: # OF	CREMAINS	PER GRAVE	4: OR 1 FULL AND	3 CREMATION PER GRAVE				
Installatio	on Fee Payable to: <u>CASH,</u>	CHECK				Spring delivery begins (date):	_	_	_	
MARBLE	PARK CEMETERY - ATTN	I: JON VES	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	X
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	iles & Regu	ılations - Ins	stallation	Fee			
GRANITE	AND BRONZE FLUSH MA	ARKERS C	NLY.							
FOUNDA	TION FEE:									
24"x 12"x	4" - GRANITE OR BRONZ	Œ - \$250.0	0							
Natar	05 5111 BURIA 0 BED 08		- 00-144 B		\/E					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	IS PER GRAV	VE: 2 OR 1 FU	JLL 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	(810) 653-2196					Symbol Required on Memorial:	Yes		No	Х
Fax	(810) 658-0165					If yes, what symbol?			_	
Email	cfirman@covenantceme	tery.com				Benches Permitted:	Yes	Х	No	
Contact	CATHY	Phone	(810) 694-	4101 - Until Ap	oril 1st	Borders Required on Foundation:	Yes		No	Χ
			Rui	les & Regulati	ions - Installatior	ı Fee				
FLUSH G	RANITE (SAWN SIDES C	ONLY) AND	BRONZE M	IARKERS. NC	BEVELS.					
	TION FEE:		. 5 . 1. (0. 1.)							
	4" - (LARGEST # X 20.00	PER LINE	AR INCH)							
EXAMPLE	E - 24" x 20.00 = \$480.00									
Notes: #	OF FULL BURIALS PER GF	RAVE: 1 # O	F CREMAINS	S PER GRAVE:	2 (2ND RIGHT OF	INTERMENT FEE)				
	OR 1 FULL AND 1 C				,	,				
				-						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
MEADOW	VIEW MEMORIAL GARD	DENS				APRIL 15TH OR CALL BEFORE DELIV	/ERIN	G		
2020 E. H	IILL RD.					Fall/Winter Delivery "cutoff" (date):				
GRAND E	BLANC, MI 48439					WEATHER PERMITTING				

## <u>METAMORA</u>

A 1 1	DDVDEN DOAD					From Box 2004	V	٦	
	DRYDEN ROAD					Form Required:	Yes	No	X
City	METAMORA	State	MI	Zip	48455	Grave Location Required on Memorial:	Yes	No	X
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 X	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 695- (810) 735-			Borders Required on Foundation:	Yes	No	Х
			Ru	les & Regulat	ions - Installation	Fee			
FLUSH, S	LANTS, BEVELS & MONU	JMENTS							
FOUNDA	TION FEE:								
.60 PSI, \$	150.00 MINIMUM - Price ir	ncludes the	foundation	and installation	n <b>(as of 1-1-25)</b>				
Price is ca	alculated by the size of the	base meau	rement of t	he monument.					
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER GRAVE			
					<del></del>				
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			

#### MICHIGAN MEMORIAL PARK

FLAT ROCK, MI 48134

Address	32163 HURON RIVER DE	RIVE				Form Required: FORM	Yes	X	No	
City	FLAT ROCK	State	MI	Zip	48134	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(734) 782-2473					Symbol Required on Memorial:	Yes		No	Х
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	33-1276	Nicholas	Borders Required on Foundation:	Yes	Х	No	
						2" border required				
			F	Rules & Re	gulations - Installati	on Fee				
FLUSH BR	ONZE ONLY. MONUMENTS	S IN RESTR	ICTED AR	EAS. ROU	ND VASES ONLY ON B	RONZE MARKERS.				
BABY LAN	D IS 6"x 6", 20"x 10" or 13"x	13" BRONZI	E - MUST I	HAVE GRAN	NITE BASE.					
ALL BRON	ZE MUST HAVE GRANITE B	SASE ANY C	OLOR. N	O INSCRIP	TIONS on GRANITE BA	ASES.				
FLAT RELI	EF BRONZE PORTRAITS PE	REFFERED.	CERAMIC	C PHOTOS \	WITH A CAST BRONZE	RING (Coldspring Precious Portrait) ARE ACC	EPTED	).		
2 NAMES	CANNOT GO ON A 24"x 12" (	OR A 24"x 1	4". MAXIN	IUM SIZE O	F 2ND MARKER ON SI	NGLE GRAVE CANNOT EXCEED SIZE OF FIF	RST MA	RKER.		
мімімим	SIZE OF COMPANION MAR	KER ON TW	O GRAVE	ES IS 44"x 1	<b>4</b> ". BLOCK 38					
BI-LEVEL	REQUIRES 16"x 24" OR 24"	x 30", MINI	MUM SIZE	FOR A TRI	IPLE GRAVE IS 56"x 1	6".				
6"x 6" - \$8	30.00	24"x 30" -	\$761.00		PRICE	<u>MILITARY</u>				
20"x 10" -	\$269.00	44"x 14" -	\$691.00		FOUNDATION	28"x 26" W/VASE - \$510.00				
24"x 12" -	\$358.00	56"x 16" -	\$960.00		BY SIZE OF GRANITE	54"x 16"x 4" W/VASE - \$706.00				
24"x 14" -	\$403.00	72"x 32" -	\$2,189.0	00	BASE:	54"x 16"x 4" NO VASE - \$605.00				
16"x 24" -	\$448.00				.80 PSI	12"x 12" BRONZE VASE - \$115.	00			
Notes: #	OF FULL BURIALS PER (	GRAVE: UF	7O 2 DE	EPENDING	ON SECTION					
# (	OF CREMAINS PER GRAV	/E: 3 OR 1	FULL AN	ND 2 CREM	IAINS 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	lemorial:	Yes		No	Х
Fax	(248) 887-4487					If yes, what symbol?				=	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG	Phone	(248) 887	<b>'-</b> 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 - Installation	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 GRANIT	E (NO FOUND	ATION)						
\$0.50 PSI	, MINIMUM \$175.00										
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON	CONCRETE (N	ION VA)						
\$0.70 PSI	OF FOUNDATION, MININ	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 DETERM	MINE 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 I	N VASE)					
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRE	MATION BURI	ALS PER GRAVE:	2-3					
(C	ALL MIKE @ HURON CEN	METERY M	<u>AINT</u> ENAI	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

ROCHESTER, MI 48307

Address	800 1ST STR	EET					Form Required: FORM	Yes	Χ	No	
City	ROCHESTER	₹	State	MI	Zip	48307	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 651-906	31					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 733-317	70					If yes, what symbol?			_	
Email	LOCONNOR	@ROCHEST	ERMI.OR	<u>G</u>			Benches Permitted:	Yes		No	Х
Contact	LEEANN OCC AT CITY OF F		<b>Phone</b> R	(248) 65 (248) 65			Borders Required on Foundation:	Yes		No	Х
				R	ules & Regulat	ions - Installatior	ı Fee				
Fifth Add	ition (Flush m	arkers only	)				There are no height regulations in Additions	One, Two	<b>o</b>		
Sizes	Maximum	Standard					Three or Four.				
Single	28x12	24x12									
Double	68x24	48x12									
Veterans		24x12									
Cremation	18x13	18x9									
Infant	18x10	18x10									
Sixth Add	lition (Monum	ents Only)									
Single	32x24x48 H	24x12x8 H									
Double	68x24x48 H	24x12x18	Н								
FOUNDA <sup>*</sup>	TION FEE: \$1.	00 PSI L x V	V								
http://www	v.ci.rochester.m	ni.us/117/Mo	unt-Avon-0	<u>Cemetery</u>							
No Flowe	r vases unles	s part of the	e memoria	I							
Notes: # (	OF FULL BURIA	LS PER GRA	VE: 1 # OF	CREMAIN	IS PER GRAVE:	2 OR 1 FULL AND	CREMATION PER GRAVE				
_											
Installatio	on Fee Payable	e to:					Spring delivery begins (date):				
CITY OF I	ROCHESTER						APRIL 15TH				
400 SIXTI	H ST. STREET						Fall/Winter Delivery "cutoff" (date):				

OCTOBER 31ST

#### MT. CARMEL

Address	909 FORD AVE.					Form Required: FORM	Yes	X	No	
City	WYANDOTTE	State	MI	Zip	48192	Grave Location Required on Memorial:	Yes		No	Х
Phone Fax	(734) 285-2155 (734) 285-6510					Symbol Required on Memorial:	Yes		No	Χ
Email	mariles.lori@aodcemeteri	oc ora				If yes, what symbol?			1	
Elliali	manies.ion@aodcemeten	es.org				Benches Permitted:	Yes		No	Х
Contact	LORI MARILES	Phone	(734) 28	5-2155		Borders Required on Foundation:	Yes		No	Х
			R	ules & Regulat	tions - Installation	n Fee				
MONUME	NTS WITH BASE, BEVEL	, SLANT C	R LAWN-	LEVEL MARKE	S ARE PERMITT	ED ON ONE GRAVE				
OR PLAC	ED OVER MULTIPLE GRA	AVES. TH	E MAXIMU	JM LENGTH OF	F A MEMORIAL IS	S AS FOLLOWS:				
20"x 6"x 2	6" MONUMENT ON A 24"	x 12"x 6" B	ASE - ON	E SPACE						
36"x 8"x 2	8" MONUMENT ON A 48"	x 14"x 8" B	ASE - TW	O SPACES						
16"x 10"x	4" - INFANT SPACE - \$30	0.00								
MILITARY	MARKER - NO CHARGE	IF ORDER	RED THRU	J VA						
24"x 12"x	4" - \$475.00									
48"x 12"x	4" - \$630.00									
MONUME	NTS - WITH PRIOR APPR	ROVAL AN	D ADDITI	ONAL LOT UP	GRADE FEE:					
BASE 24"	x 12" - \$500.00									
BASE 48"	x 14" - \$1,125.00									
BASE 60"	GENERALLY O		GRAVE							
BASE 66"	MONUMI	ENTS								
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CR	EMAINS PER G	GRAVE: 2					
							_	_		
Installatio	on Fee Payable to: MT. CA	ARMEL CEI	METERY			Spring delivery begins (date):				

MAIL TO: OUR LADY OF HOPE CEMETERY

18303 ALLEN RD.

BROWNSTOWN, MI 48193

Spring delivery begins (date):

APRIL 1ST

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST

## MT. ELLIOTT

DETROIT, MI 48234

Address 1701 MT. ELLIOTT ROAD  City DETROIT State MI Zip 48207 Grave Location Required on Memorial: Yes No X Phone (313) 365-5650 Symbol Required on Memorial: Yes No X Fax (313) 365-6460 If yes, what symbol?  Email jabbott@mtelliott.com  Rules & Regulations - Installation Fee  FOUNDATION FEE:  16'x 8" BABY MARKERS - \$350.00  24'x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00  ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2		4704 NAT ELLIOTT 504	_				E		V	1	
Phone (313) 365-5650 Fax (313) 365-5650 Fax (313) 365-6460 Email jabbott@mtelliott.com Benches Permitted: Yes No X  Contact Joann Abbott Phone Borders Required on Foundation: Yes No X  Rules & Regulations - Installation Fee  FOUNDATION FEE: 16"x 8" BABY MARKERS - \$350.00 24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00 ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"							Form Required: FORM	Yes	X	No	
Fax (313) 365-6460	City	DETROIT	State	MI	Zip	48207	Grave Location Required on Memorial:	Yes		No	Х
Email jabbott@mtelliott.com  Benches Permitted: Yes No X  Contact Joann Abbott Phone  Rules & Regulations - Installation Fee  FOUNDATION FEE: 16"x 8" BABY MARKERS - \$350.00 24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00 ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"		` ,					Symbol Required on Memorial:	Yes		No	Х
Rules & Regulations - Installation Fee  FOUNDATION FEE:  16"x 8" BABY MARKERS - \$350.00  24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00  ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE  THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT  MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	Fax	(313) 365-6460					If yes, what symbol?			=	
Rules & Regulations - Installation Fee  FOUNDATION FEE:  16"x 8" BABY MARKERS - \$350.00  24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00  ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE  THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT  MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	Email	jabbott@mtelliott.com					Benches Permitted:	Yes		No	Χ
FOUNDATION FEE:  16"x 8" BABY MARKERS - \$350.00  24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00  ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE  THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT  MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	Contact	Joann Abbott	Phone				Borders Required on Foundation:	Yes		No	Χ
FOUNDATION FEE:  16"x 8" BABY MARKERS - \$350.00  24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00  ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE  THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT  MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"				D.	ulos 8 Poquilat	tions - Installation	1 Fac				
16"x 8" BABY MARKERS - \$350.00 24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00 ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"				N	ules & Regulat	lions - mstanation	1 Fee				
24"x 12" SINGLE GRANITE MARKERS (INCLUDING GOVERNMENT) - \$350.00  ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE  THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT  MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	FOUNDA	TION FEE:									
ALL MONUMENTS, BENCHES, AND CREMATION MEMORIALS - \$800.00  FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE  THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT  MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	16"x 8" B	ABY MARKERS - \$350.00									
FLUSH GRANITE MARKERS, SLANTS AND MONUMENTS IN DESIGNATED AREAS. MONUMENTS NO MORE THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	24"x 12" \$	SINGLE GRANITE MARKE	RS (INCLI	JDING GO	VERNMENT) -	\$350.00					
THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	ALL MON	UMENTS, BENCHES, AN	D CREMA	TION MEM	ORIALS - \$800	0.00					
THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"											
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THAN 7" IN HEIGHT, INCLUDING THE BASE. BASES MINIMUM 10" WIDE & 8" IN HEIGHT. MONUMENT MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"	FLUSH G	RANITE MARKERS. SLAN	NTS AND N	MONUMEN	ITS IN DESIGN	IATED AREAS. M	ONUMENTS NO MORE				
MINIMUM THICKNESS OF 8", MINIMUM HEIGHT OF 28", MINIMUM LENGTH OF 36"											
		•					TTT. MONOWENT				
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER GRAVE: 2	IVIIINIIVIOIV	I I HICKINESS OF 6, IVIIINI	MOM HEIC	3H1 UF 20	, IVIIINIIVIOIVI LE	ING I II OF 30					
	Notes: #	OF FULL BURIALS PER GR	AVF: 1 # C	OF CREMAT	ION BURIALS P	FR GRAVE: 2					
OR 1 FULL AND 1 CREMATION BURIAL PER GRAVE						21. 010.02. 2					
ON 1 FULL AIND 1 GREWATION BURIAL FER GRAVE		ON I FULL AIND I GREWATI	ON BURIAL	L PER GRAV	V L						
Installation Fee Payable to: Spring delivery begins (date):	Installatio	on Fee Payable to:					Spring delivery begins (date):				
MT. ELLIOTT CEMETERY (MAIL TO MT. OLIVET - DET)  APRIL 1ST		-	O MT. OLI	VET - DET	)						
17100 VAN DYKE Fall/Winter Delivery "cutoff" (date):		•	<b></b>	<b></b> -	,						

NONE

# MT. HOPE - LAPEER

LAPEER, MI 48446

city's website at www.ci.lapeer.mi.us

Address	1230 W. PARK ST.					Form Required: Preferre	d		See b	elow*	
City	LAPEER	State	MI	Zip	48446	Grave Location Required	d on Memorial:	Yes		No	Χ
Phone	(810) 664-2902					Symbol Required on Mer	morial:	Yes		No	Χ
Fax	(810) 667-7157					If yes, what symbol?					
Email	djansen@ci.lapeer.mi.us					Benches Permitted:	Call first	Yes	Χ	No	
Contact	DANA JANSEN	Phone	(810) 664	1-2902		Borders Required on For	undation:	Yes	Χ	No	
	www.ci.lapeer.mi.us					2" border	r on all sides				
			Rı	ules & Regulat	tions - Installatior	Fee					
FLUSH, B	EVELS, SLANTS										
Max 40"											
	ΓΙΟΝ FEE:					Cash and Checks Acce	epted				
.40 PSI							•				
CALL OF	FICE AT 810-664-2902 FO	R LARGEF	R MARKER	RS AND ANY O	THER QUESTION	IS.					
*CEMETE	RY FORM: CEMETERY F	PREFERS	FORM AS	IT WILL BE HE	ELPFUL WITH INS	URING THEY HAVE THE	INFORMATIC	N NE	EDED T	O PLA	CE
	ATION IN THE PROPER L										
7.1.00112	,	200, 111011			.5.7.507.20 0.0.	· <u>-</u> .					
Notes as # 6		\/F 4		10 DED 0D 41/E	0.00.4.5.11.1.4.10.	LODEMATION DED ODANE					
Notes: # (	OF FULL BURIALS PER GRA	VE: 1 # OI	F CREMAIN	IS PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE					
		0		0.0 111.0			41.43				
	on Fee Payable to: Cash.		-			Spring delivery begins	(date):				
CITY OF I	_APEER Note: a	3% fee ne	eeds to be a	added to credit	t card	APRIL 1ST					
576 LIBER	RTY PARK payme	nts and are	e to be mad	de in person or	on the	Fall/Winter Delivery "cu	utoff" (date):				

WEATHER PERMITTING - CALL FIRST

# MT. HOPE - PORT HURON

Addross	1209 KRAFFT RD.					Form Required:	Yes	No	Х
City	PORT HURON	State	MI	Zip	48060	Grave Location Required on Memorial:		No	X
Phone	(810) 985-5323	State	IVII	Ζip	40000	Symbol Required on Memorial:	Yes	No	X
Fax	(810) 985-3611					·	165	INO	^
Email	KEITH@HOLYTRINITYP	H.ORG				If yes, what symbol?		NI-	V
			()			Benches Permitted:	Yes	No	X
Contact	KEITH CAMPBELL	Phone	(810) 985-	5323		Borders Required on Foundation:	Yes	No	Χ
			Dest	aa 9 Dagudat	ione Installation	Fac			
				es & Regulat	ions - Installation	ree			
FLUSH, E	BEVELS, SLANTS (no long	er acceptin	g benches)						
FOUNDA	TION FEE:								
.85 PSI, \$	144.00 MINIMUM								
PLEASE :	SEE ATTACHED MONUM	ENT PLAC	EMENT FEE	<u> </u>					
CALL FO	R LARGER MARKERS								
Notes: #	OF FULL BURIALS PER GR	ΔVF·1 # Ω	- CREMAINS	PER GRAVE	4 OR 1 FULL AND 1	CREMATION PER GRAVE			
1101001 11	OF TOLL BORNALOT LIK OIL	/(VE. 1 // O	OT LEW MITTO	TER ORIVE.	TORT TOLE 71110	SKEWINTON' EN 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	727 ORCHARD LAKE RE	Э.				Form Required: FORM	Yes	X	No	
City	PONTIAC	State	MI	Zip	48341	Grave Location Required on Memorial:	Yes		No	Х
Phone	(248) 350-1900					*Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 350-1737					*Cross not required, however symbo	ls must	be app	ropriat	e
Email	oconnor.colleen@aod.org	1				Benches Permitted: *See Below	Yes	Х	No	
Contact	COLLEEN O'CONNOR	Phone	(248) 350-	-1900		Borders Required on Foundation:	Yes		No	Х
			Ru	les & Regulat	ions - Installation	ı Fee				
FLUSH, E	BEVELS, SLANTS AND MO	ONUMENT	S.							
MARKER	S IN BABY SECTION MUS	ST NOT EX	(CEED 16"x	10"x 4"						
24" WIDE	MAX FOR SINGLE GRAV	/E.								
*BENCHE	S ARE PERMITTED BUT	REQUIRE	PRIOR APP	PROVAL						
FOUNDA	TION FEES:									
24"x 12"x	4" - \$450.00		UPRIGHT	MARKERS A	RE SUBJECT TO	AN ADDITIONAL PER-GRAVE LOT UP	'GRADI	E FEE.		
			FAMILIES	REQUIRE A	PPROVAL FROM	CEMETERY BEFORE PURCHASING A	N UPR	IGHT I	VARKE	ĒR.
SINGLE N	MONUMENT FOUNDATIO	N - \$450.0	0							
2 GRAVE	MONUMENT FOUNDATION	ON - \$700.	00							
Notes: #	OF FULL BURIALS PER GR	AVE: # O	F CREMAINS	S PER GRAVE:	OR FULL AND	CREMATION PER GRAVE				
Installation	on Fee Payable to:					Spring delivery begins (date):				
HOLY SE	PULCHRE CEMETERY					APRIL 1ST				
25800 W.	TEN MILE RD.					Fall/Winter Delivery "cutoff" (date):				
SOUTHF	IELD, MI 48033					NOV. 1ST				

## MT. HOPE MEMORIAL GARDENS - LIVONIA

Address	17840 MI	IDDLEBELT					Form Required:	MSLIA FORM	Yes	Χ	No	
City	LIVONIA		State	MI	Zip	48152	Grave Location F	Required on Memorial:	Yes		No	Х
Phone	(734) 522						Symbol Required	on Memorial:	Yes		No	Χ
Fax	(734) 522						If yes, what syn	nbol?		•	1	
Email	wjohn1@	everstorypartne	ers.com				Benches Permitte	ed: Call first	Yes	Х	No	
	C. COOPE Partners	ER or J. JOHNSC	N <b>Phone</b>	(734) 522	2-2200		Borders Required	d on Foundation:	Yes		No	Х
				Rı	ıles & Regula	tions - Installation	Fee					
FLUSH M	ARKERS	ONLY. GRANI	ΓΕ & BRON	ZE ALLOW	/ED. MONUM	IENT SECTION. B	RONZE MUST BE					
MOUNTE	D ON BAS	SE BEFORE DE	LIVERY TO	CEMETE	RY. VASES A	LLOWED. ANY CO	DLOR GRANITE					
BRONZE	S BASES A	ALLOWED. AL	L MONUME	NTS MUS	T BE APPRO\	/ED BY MT. HOPE	BEFORE SOLD.					
CEMETE	RY FEES:	new pricin	g effective	10-7-24	M	IEMORIAL SURVE	Y LAYOUT INSPE	ECTION ASSESSMEN	T FEE	(MSLI	<b>A)</b> :	
					С	OMPANION/ BENC	H/ PRIVATE COL	.UMBARIA - \$1,499.00	)			
Foundati	on Fee: S	\$1.00 PSI Paya	ble to Mt. H	lope	S	INGLE/ BOULDER	CREMATION ME	MORIAL - \$899.00				
		(in addition to	flagging fe	e)	V	ETERAN/ BABY/ IN	IFANT/ PET - \$49	9.00				
INCH ME	MORIALS	SETTING FEE	: \$1.00 PSI	payable to	Inch Memoria	als						
36" MAX (	ON SINGL	F			MUST GET	FORM APPROVED	BEFORE YOU	AN SEND MONEY FO	OR FI 4	AGGIN	G	
42" BENC					111001 021	I OKIII AI I KOVEE	DEFORE 100 C	AN OLIVE MONET IN		·COIII	•	
	ON DOUB	I F	> COMPANIC	ONS								
	BENCH AL											
			2ΔVF·1 #Ω	E CREMAIN	IS PER GRAVE	:: 3 OR 1 FULL AND	CREMAINS PER (	3RAVE				
itotoo. "	01 1 022 2	JOHN, REG T EN GI	0.172.1 11 0	TOTALIVIA (II	to i Eit Olivive	0 01( 11 022 71(0)		510.00				<u> </u>
Installatio	on Fee Pa	yable to:					Spring delivery	begins (date):				
	·						MARCH 15th					
							Fall/Winter Deliv	very "cutoff" (date):				
							NOVEMBER 1st	. ,				

# MT. KELLY CEMETERY

Address	23250 CHERRY HILL RO	DAD				Form Required: FORM	Yes	Χ	No	
City	DEARBORN	State	MI	Zip	48124	Grave Location Required on Memorial:	Yes		No	Χ
Phone Fax	(313) 278-5555					Symbol Required on Memorial:  If yes, what symbol?	Yes		No	Χ
Email	cemetery@shparish.org					Benches Permitted:	Yes		No	Х
Contact	ELENA LOVELACE lane10020@gmail.com	Phone	C(313)	268-7957		Borders Required on Foundation:	Yes		No	Х
			F	Rules & Regu	ılations - Installa	tion Fee				
INCH ME	MORIALS TO DO FOUND	ATIONS								
INFORM <i>i</i>	NG WITH SIZE OF MEMO ATION) BEFORE PRODUC RY REQUIRES 1 DAY NO	CTION.				EMAIL OR TEXT TO ELENA (SEE ABOVE O	CONTA	CT		
l										
ı										
Notes: # (	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAIN	NS PER GRAV	E: 2 OR 1 FULL	AND 2 CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
INCH ME	MORIALS					WEATHER PERMITTING				
580 SOU	TH MAIN					Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167					WEATHER PERMITTING				

# MT. OLIVET - DETROIT

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	5-5650		Borders Required on Foundation:	Yes		No	Х
			Rı	ules & Regulat	ions - Installation	ı Fee				
FLUSH G	RANITE & MONUMENTS.	DUPLICA	TES ALLO	OWED. CREM	ATION BENCHES	(MUST HAVE				
PEDESTA	AL) AND SLANTS IN DESI	GNATED A	AREAS ON	LY. VA'S TO E	BE BURIED UNDE	R NEW MARKERS.				
1 MARKE	R PER GRAVE ALLOWED	<b>)</b> .								
FOUNDA	TION FEE:									
16"x 8" (B	ABY) - \$350.00									
24"x 12" (	SINGLE, INCL GOV.), PEI	NCIL ROU	ND EDGES	S, SAWED SIDI	ES, FLAT TOP - \$3	350.00				
24"x 16" (	DOUBLE INTERMENT, SE	EC. C) - \$3	50.00							
CORNER	POSTS - \$50.00 EACH									
LEDGER	S (DUP. ONLY) - \$500.00									
ALL MON	UMENTS, BENCHES, AN	D CREMA	TION MEM	ORIALS - \$800	0.00					
NO RESE	T FEESNEED LETTER	TO STATE	WHAT TO	DO WITH OL	D MARKER.					
Notes: #	OF FULL BURIALS PER GR.	AVE: 1 # C	OF CREMAT	ION BURIALS P	ER GRAVE: 2					
	OR 1 FULL AND 1 CREMATI	ON BURIAL	PER GRAV	/E						
Installatio	on Fee Payable to:					Spring delivery begins (date):				
MT. OLIV	ET CEMETERY					APRIL 1ST				
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				

NONE

# MT. OLIVET - HOWELL

										-
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									
THECITY	<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

Address	BALDWIN RD. OFF OAK	WOOD RD				Form Required:	Yes	No	Х
City	OXFORD	State	MI	Zip	48371	Grave Location Required on Memorial:	Yes	No	Χ
Phone Fax	(248) 628-9787 (248) 628-8139					Symbol Required on Memorial:	Yes	No	Χ
Email	krichter@oxfordtownship.d	org				If yes, what symbol? Benches Permitted:	 Yes	No	Υ
Contact	KELLY RICHTER @ TOWN HAI	Phone	(248) 628-	-9787		Borders Required on Foundation:	Yes	No	X
							-	_	

#### Rules & Regulations - Installation Fee

FOUNDATION FEE: .75 PSI, \$150.00 MINIMUM - PRICE INCLUDES THE FOUNDATION AND INSTALLATION (as of 1-1-25)

<u>Size</u>	<u>Price</u>	<u>Size</u>	<u>Price</u>	<u>Size</u>	<u>Price</u>	
18"x 10"	\$150.00	40"x 20"	\$600.00	52"x 18"	\$702.00	PRICE IS CALCULATED BY THE SIZE OF THE BASE
24"x 12"*	\$216.00	42"x 12"	\$378.00	54"x 20"	\$810.00	MEASUREMENT OF THE MONUMENT
28"x 16"*	\$336.00	42"x 18"	\$567.00	60"x 18"	\$810.00	
28"x 18"**	\$378.00	44"x 20"	\$660.00	60"x 24"	\$1,080.00	
30"x 16"	\$360.00	46"x 12"	\$414.00	68"x 24"	\$1,224.00	
32"x 12"	\$288.00	48"x 18"***	\$648.00	72"x 24"	\$1,296.00	

80"x 24"

84"x 24"

\$1,440.00

\$1,512.00

\$480.00

\$486.00

32"x 20"

36"x 18"

TOWNSHIP RUNS THE CEMETERY.
GENESEE VALLEY VAULT PUTS IN

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

\$750.00

\$468.00

Installation Fee Payable to:	CASH, CHECK OR CREDIT CARD IN OFFICE
OXFORD TOWNSHIP	
300 DUNLAP RD.	
OXFORD, MI 48371	

50"x 20"

52"x 12"

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

<sup>\* =</sup> ALSO AVAILABLE AS GOVERNMENT FOUNDATIONS

<sup>\*\* =</sup> BRONZE WITH VASE

<sup>\*\*\* =</sup> DOUBLE BRONZE WITH VASE

# MT. VERNON

									•		
Address	CORNER OF 28 MILE &	MT. VERN	ON RD.			Form Required: FORM	Yes	Х	No		
City	WASHINGTON	State	MI	Zip	48094	Grave Location Required on Memorial:	Yes		No	Χ	
Phone	(586) 677-4200	Cemetery	/ Informati	on: 586-786-0	022	Symbol Required on Memorial:	Yes		No	Χ	
Fax	(586) 677-4238					If yes, what symbol?			_		
Email	browna@washingtontwpn	ni.org				Benches Permitted:	Yes		No	Χ	
Contact	AUDREY BROWN	Phone	(586) 677	-4200		Borders Required on Foundation:	Yes	Х	No		
	SHELLEY RIOS	rioss@wa	shingtontw	pmi.org		3" border required around stone/m	arker		_		
	Rules & Regulations - Installation Fee										
FOUNDATIONS TO BE ORDERED THRU CHARTER TOWNSHIP OF WASHINGTON.											
FOUNDA	TIONS ARE POURED MA	Y - ОСТОВ	ER, DEPE	NDING ON WE	EATHER.						
PRICING	DEPENDS ON SIZE OF M	IONUMEN <sup>-</sup>	T. CONTA	CT TOWNSHII	P FOR DETAILS V	VHEN ORDERING.					
FOUNDA	TION FEE:										
42" x 24"	- \$550.00										
54" x 24"	- \$700.00										
Notes: #	OF FULL BURNALO DED A	DDA\/E. 4	# OF ODE	MAINO DED O	DAVE: 2						
NOTES: #	OF FULL BURIALS PER (	JKAVE: 1	# OF CRE	IVIAIINO PER G	NAVE. Z						
Inetallatio	on Fee Payable to:					Spring delivery begins (date):					
	-	JOTON				MAY 1ST					
	R TOWNSHIP OF WASHIN	NGTON									
57900 VA						Fall/Winter Delivery "cutoff" (date):					
WASHING	GTON, MI 48094					NOVEMBER 1ST					

#### NEW CALVARY CATHOLIC

NEW CALVARY CATHOLIC CEMETERY

(SAME ADDRESS AS ABOVE)

										7	
Address	4142 FLUSHING RD.					Form Required:	*See Below	Yes	Х	No	
City	FLINT	State	MI	Zip	48504	Grave Location F	Required on Memorial:	Yes		No	Χ
Phone	(810) 732-2620					Symbol Required	d on Memorial:	Yes		No	Χ
Fax	(810) 732-6630					If yes, what syr	mbol? Prefer religious			_	
Email	rvance@dioceseoflansing	.org				Benches Permitt	ed:	Yes		No	Х
Contact	RACHEL VANCE	Phone	(810) 732-	-2620		Borders Require	d on Foundation:	Yes	Χ	No	
		<b>Ext:</b> 101				At least 1" de	epending on size of mar	ker			
			Ru	les & Regulati	ions - Installatio	n Fee					
BEVELS,	BENCHES, LEDGERS AR	E NOT ALL	OWED.								
SLANT AN	SLANT AND UPRIGHT MARKERS & MONUMENTS ARE ONLY ALLOWED IN CERTAIN SECTIONS. CONTACT										
CEMETER	CEMETERY OFFICE TO CONFIRM. NO CAMEOS ON FLUSH MARKERS. ALL MARKERS & MONUMENTS										
ARE SUB	JECT TO CATHOLIC CHU	RCH TEAC	CHINGS AN	ND BELIEFS. '	*ALL MARKER &	MONUMENT DE	SIGNS				
MUST BE	SUBMITTED TO THE CE	METERY C	FFICE FO	R APPROVAL							
FOUNDAT	ΓΙΟΝ FEE:										
SINGLE -	\$300.00		INFANT -	\$90.00							
COMPAN	ON - \$400.00		VA MARK	KER - \$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 PRICING	Э								
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN	IS PER GRAVE:	2 OR 1 FULL AND	1 CREMATION PER	R GRAVE				
Installatio	n 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

									7			
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?			_			
Email						Benches Permitted:	Yes		No	Χ		
Contact	MIKE WILLENBERG @	Phone	<b>e</b> (248) 88	7-6700		Borders Required on Foundation:	Yes	Х	No			
HCM	HURON CEMETERY MA	AINTENANC	CE			2" border required						
Rules & Regulations - Installation Fee												
BRONZE,	FLUSH GRANITE, SLAN	ITS, AND M	IONUMEN	ITS - 36" MAX PER GRA	VE							
GOVERN	MENT ISSUED MARKER	S - ALL TYI	PES\$2	<u>250.00</u>								
FLUSH SI	ETTING OF GRANITE & F	3RONZE O	N GRANIT	TE (NO FOUNDATION)								
\$0.50 PSI	, MINIMUM \$175.00											
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	ENTS & BRO	ONZE ON	CONCRETE (NON VA)								
\$0.70 PSI	OF FOUNDATION, MINI	MUM \$250.	00									
ALL FOU	NDATIONS MUST BE 2" I	_ARGER O	N ALL SIC	ES THAN MONUMENT	BASE.							
ADD 4" T0	O LENGTH AND WIDTH	OF BASE T	O DETER	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	LY	\$100.00	) (ADD \$5	0.00 FOR ALL FEES FO	R BUILT IN	N VASE)						
	OF FULL BURIALS PER											
(C	ALL MIKE @ HURON CE	METERY N	1AINTENA	NCE FIRST)								
ì				,								
Installatio	on Fee Payable to:	CASH, CH	HECK			Spring delivery begins (date):						

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

#### **NORTH OXFORD**

Address	2600 N. OXFORD 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	Х
Fax	(248) 628-8139					If yes, what symbol?			
Email	krichter@oxfordtownship.	org				Benches Permitted:	Yes	No	Х
Contact	KELLY RICHTER @ TOWN HA	AL Phone	(248) 628-	-9787		Borders Required on Foundation:	Yes	No	Х
								-	

#### Rules & Regulations - Installation Fee

84"x 24"

\$1,512.00

FOUNDATION FEE: .75 PSI, \$150.00 MINIMUM - PRICE INCLUDES THE FOUNDATION AND INSTALLATION (as of 1-1-25)

<u>Size</u>	<u>Price</u>	<u>Size</u>	<u>Price</u>	<u>Size</u>	<u>Price</u>	
18"x 10"	\$150.00	40"x 20"	\$600.00	52"x 18"	\$702.00	PRICE IS CALCULATED BY THE SIZE OF THE BASE
24"x 12"*	\$216.00	42"x 12"	\$378.00	54"x 20"	\$810.00	MEASUREMENT OF THE MONUMENT
28"x 16"*	\$336.00	42"x 18"	\$567.00	60"x 18"	\$810.00	
28"x 18"**	\$378.00	44"x 20"	\$660.00	60"x 24"	\$1,080.00	
30"x 16"	\$360.00	46"x 12"	\$414.00	68"x 24"	\$1,224.00	
32"x 12"	\$288.00	48"x 18"***	\$648.00	72"x 24"	\$1,296.00	
32"x 20"	\$480.00	50"x 20"	\$750.00	80"x 24"	\$1,440.00	

<sup>\* =</sup> ALSO AVAILABLE AS GOVERNMENT FOUNDATIONS

\$486.00

36"x 18"

TOWNSHIP RUNS THE CEMETERY.
GENESEE VALLEY VAULT PUTS IN

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

\$468.00

Installation Fee Payable	to: CASH, CHECK OR CREDIT CARD IN OFFICE
OXFORD TOWNSHIP	
300 DUNLAP RD.	
OXFORD, MI 48371	

52"x 12"

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

<sup>\*\* =</sup> BRONZE WITH VASE

<sup>\*\*\* =</sup> DOUBLE BRONZE WITH VASE

# **NORTHVIEW**

Address	600 KENSINGTON					Form Required:	Yes	N	О	Χ
City	DEARBORN	State	MI	Zip	48128	Grave Location Required on Memorial:	Yes	N	О	Х
Phone Fax	(313) 565-0005 N/A					Symbol Required on Memorial:  If yes, what symbol?	Yes	N	О	Х
Email	N/A					Benches Permitted:	Yes	$\square_{N}$	0	Х
Contact	JIM TOMS	Phone	(313) 56	65-0005		Borders Required on Foundation:	Yes	N		X
			R	Rules & Regi	ulations - Install	ation Fee				
NO FOUN	NDATION ORDERS ACC	EPTED BET	WEEN N	OVEMBER 1	AND APRIL 1.	NO MONUMENT IS TO				
EXCEED	THE SIZE OF <b>SLANT 36</b>	"x 10"x 16"	ON A BA	SE 48"x 14"	'x 6". SUPERIN	TENDENT MUST BE				
PRESEN	T WHEN MEMORIAL IS S	SET. NEED	APPROV	AL FROM C	EMETERY PRIC	R TO PRODUCTION AND				
DELIVER	Y OF MEMORIAL.									
SINGLE (	GRAVE MARKERS SHOU	ILD BE EITI	HER 24"x	12"x 4" FLA	T OR 24"x 10"x 1	6" SLANT. <b>BASES FOR</b>				
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 G	RAVE: # O	F CREMAI	NS PER GRA	VE: OR FULL	AND CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
NORTHV	IEW CEMETERY					APRIL 1ST - <b>48 HR NOTICE PRIOR T</b>	O DEL	IVERY		
600 KENS	SINGTON					Fall/Winter Delivery "cutoff" (date):				
DEARBO	RN, MI 48128					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	Χ
Phone	(734) 475-3322					Symbol Required on Memorial:	Yes		No	Х
Fax	N/A					If yes, what symbol?			ı	
Email	NMYERS1017@SBCGLC	BAL.NET				Benches Permitted:	Yes	Х	No	
Contact	NANCY MYERS	Phone	(734) 475-3	3322		Borders Required on Foundation:	Yes		No	
						4" border on all sides measured from widest	portion	of base		
			Rules	& Regulation	s - Installation Fe	ee Cash and Checks are accepted				
FLUSH, B	EVEL, BENCHES AND MO	ONUMENT	S							
FOUNDA	TION FEE: .70 PSI									
VETERAN	N'S PLAQUE INSTALLATIO	ON FEE - \$	100.00							
FOUNDA <sup>*</sup>	OUNDATIONS POURED 1X MONTH PROVIDED CEMETERY HAS AT LEAST 3 FOUNDATIONS TO POUR.									
*** 4" BOF	RDER AROUND THE FOU	NDATION	IS REQUIRE	<u>ED ***</u>						
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:					Spring delivery begins (date):				
OAK GRO	VE 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	Χ
Fax	(734) 663-2847					If yes, what symbol?			i	
Email	bradbouchie@ymail.com					Benches Permitted:	Yes	Χ	No	
Contact	BRAD BOUCHIE	Phone	(734)274	-7422		Borders Required on Foundation:	Yes		No	Χ
						2" border on all sides				
			Rı	ules & Regulati	ons - Installation	Fee				
FOUNDA	TION FEE:									
.65 PSI, N	//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	VITH THE CEMET	ERY APPEAL,				
NON TRA	ADIONAL MONUMENTS W	ILL NEED	TO BE AP	PROVED BEFO	ORE PLACEMENT	<del>.</del>				
(THE CE	METERY HAS A RIGHT TO	REMOVE	OR NOT	ACCEPT AN U	NDESIRED MON	UMENT)				
•						•				
İ										
İ										
NI-4 # 4	05 5111 1 0110141 0 050 004		- 00=14411	10 DED 00 AVE (	000 4 51 11 4 4 4 5					
Notes: # 0	OF FULL BURIALS PER GRA	.VE: 1 # OI	- CREMAIN	IS PER GRAVE: 2	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
BRAD BC	•					WEATHER PERMITTING				
	IOE ROAD					Fall/Winter Delivery "cutoff" (date):				
CLINTON	l, MI 49236					OCTOBER 1ST				

#### OAK GROVE - MILFORD

									1			
Address					Form Required:		Yes		No	Х		
City	MILFORD	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	Х	No			
Contact	MIKE WILLENBERG @	Phone	e (248) 887	'-6700	Borders Required on Fo	undation:	Yes	Х	No			
HCM	HURON CEMETERY MA	UNTENANO	CE		2" borde	er on all sides	,					
Rules & Regulations - Installation Fee												
BRONZE, FLUSH GRANITE, SLANTS, AND MONUMENTS - 36" MAX PER GRAVE												
GOVERNMENT ISSUED MARKERS - ALL TYPES\$250.00												
FLUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)												
\$0.50 PSI, MINIMUM \$175.00												
FOUNDATION FEE FOR MONUMENTS & BRONZE ON CONCRETE (NON VA)												
\$0.70 PSI OF FOUNDATION, MINIMUM \$250.00												
1	NDATIONS MUST BE 2" L	•		ES THAN MONLIMENT	BASE							
	O LENGTH AND WIDTH (											
		JE BAGE I	ODETERN	MINE FOUNDATION 31	ZE NEEDED.							
	00 FOR BUILT IN VASE											
	ANEOUS ITEMS	<b>.</b>										
	MARKERS (SET OF 4)											
VASE ON	ILY	\$100.00	) (ADD \$50	.00 FOR ALL FEES FO	R BUILT IN VASE)							
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CREI	MATION BURIALS PER	R GRAVE: 2-3							
(C	ALL MIKE @ HURON CE	METERY M	IAINTENAN	NCE FIRST)								
Installation	nstallation Fee Payable to: CASH, CHECK Spring delivery begins (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	Χ	No					
City	PONTIAC	State	MI	Zip	48342	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@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				
	Rules & Regulations - Installation Fee													
FOUNDATION FEE:														
FLUSH MARKERS - \$1.50 PSI, MINIMUM OF <b>\$432.00</b>														
BEVELS, SLANTS, BENCHES AND MONUMENTS - \$1.50 PSI MINIMUM of \$432.00														
DOUBLE	INTERMENT SITES REQ	UIRE A 16"	x 24" DOU	BLE INTERME	ENT MEMORIAL C	F GRANITE AND/OR								
BRONZE	ON GRANITE.													
ALL BENG	CHES, MONUMENTS, SLA	ANT MARK	ERS AND	BRONZE MAF	RKERS MUST HAV	/E A <b>Matching</b>								
GRANITE	BASE. THEY WILL NOT	BE ACCE	PTED WITI	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 GR	AVE: 1 # O	F CREMAIN	IS PER GRAVE	: 2 OR 1 FULL AND	2 CREMAINS PER GRAVE								
	on Fee Payable to:					Spring delivery begins (date):								
	. CEMETERY					WEATHER PERMITTING (USUALLY A	APRIL 1	IST)						
(SAME A	DDRESS AS ABOVE) Fall/Winter Delivery "cutoff" (date):													

WEATHER PERMITTING

# OAK RIDGE

										_			
Address	23723 TELEGRAPH R	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 Me	morial:	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	` ,	75-0660 75-5159			Borders Required on Fo	undation:	Yes		No	Х	
				Rules & Reg	gulations - Ins	stallation	Fee						
FLUSH, SLANTS AND MONUMENTS. FLUSH ONLY IN SECTION F.													
ALWAYS CALL CEMETERY TO VERIFY SIZE AND PRICE.													
FOUNDA	TION FEE:												
24"x 12"x	4" - \$300.00												
48"x 12"x	4" (Double Flush or Sla	nt NO BASE)	- \$600.00	)									
SLANTS	& MONUMENTS UP TO	) 4' BASE - \$6	680.00				MUST OWN 6 ADJOINING GRAVES FOR MONUMENT						
MONUME	NTS UP TO 5' BASE -	\$740.00											
MONUME	ENTS UP TO 6' BASE -	\$800.00					MAX OVER ALL HEIGHT 3'6" (WITH 6" BASE)						
VASE INS	STALLATION \$250												
NO VA BRONZE MOUNTED TO UPRIGHTS													
Notes: #	OF FULL BURIALS PER	GRAVE: 1 # 0	OF CREM	AINS PER GR	AVE: 3 OR 1 F	ULL AND	2 CREMAINS PER GRAVE						
In a 4 c 11 c 41	n Fan David I. (c						Omnim m. dalie e e e le e l	(-1-4-)					
	on Fee Payable to:						Spring delivery begins						
	GE CEMETERY						WEATHER PERMITTING						
(SAME ADDRESS AS ABOVE)							Fall/Winter Delivery "cutoff" (date):						
							WEATHER PERMITTIN	G					

#### OAKLAND HILLS MEMORIAL GARDENS

Address	43300 WEST 12 MILE R	D.				Form Required:	MSLIA FORM	Yes	Χ	No			
City	NOVI	State	MI	Zip	48377	Grave Location R	equired on Memorial:	Yes		No	Х		
Phone	(248) 349-2784					Symbol Required	on Memorial:	Yes		No	Χ		
Fax	(248) 349-2826					If yes, what sym	ıbol?			Ī			
Email	mscha@everstorypartne	rs.com				Benches Permitte	ed:	Yes	Х	No			
	MELISSA SCHARR Partners	Phone	(248) 349	9-2784		Borders Required	l on Foundation:	Yes		No	Х		
Rules & Regulations - Installation Fee													
BRONZE ONLY. ALL BRONZE MUST BE MOUNTED ON A 4" THICK GRANITE BASE BEFORE DELIVERY TO CEMETERY.													
BENCHES PERMITTED ANYWHERE IN CEMETERY MUST HAVE GRANITE BASE.													
MONUMENTS IN DESIGNATED AREAS ONLY.													
36" SINGI	LE GRAVE. "MONUMEN	TS WITHIN	OWNERS	PROPERTY	" ANY COLOR ALLO	OWED.							
ON FLUS	H MARKERS, ONLY CAN	IEOS CON	STRUCTE	D OF STEEL	ARE PERMITTED.								
СЕМЕТЕ	RY FEES: new pricin	g effective	10-7-24		MEMORIAL SURVE	Y LAYOUT INSPE	CTION ASSESSMEN	IT FEE	(MSLI	A):			
				(	COMPANION/ BENCH/ PRIVATE COLUMBARIA - \$1,499.00								
Foundation	on Fee: \$1.00 PSI Paya	ble to Oakl	and Hills	;	SINGLE/ BOULDER/ CREMATION MEMORIAL - \$899.00								
	(in addition to	flagging fe	e)	,	VETERAN/ BABY/ INFANT/ PET - \$499.00								
INCH ME	MORIALS SETTING FEE	: \$1.00 PS	payable to	Inch Memor	ials								
MEMORIA	AL REMOVAL FEE - \$75.	00											
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CRE	MAINS PER	GRAVE: 3								
_													
Foundation	on Fee Payable to:					Spring delivery	oegins (date):						
OAKLAND	HILLS MEMORIAL GAR	RDENS				WEATHER PERMITTING							
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):							
						WEATHER PERI	MITTING (CALL FIRS	T)					

## <u>OAKVIEW</u>

Δddraee	1032 NORTH MAIN STR	FFT				Form Required:	MSLIA FORM	Yes	Х	No			
City	ROYAL OAK	State	MI	Zip	48067		Required on Memorial:			No	V		
-		State	IVII	Ζip	40007		·				X		
Phone Fax	(248) 541-0139 (248) 541-0574					Symbol Required		Yes		No	Χ		
Email	jboom@everstorypartners	s com				If yes, what syn				1			
						Benches Permitte	•	Yes	Х	No			
	JANICE BOOMS	Phone	(248) 541	-0139		Borders Required	d on Foundation:	Yes		No	Χ		
Everstory	Everstory Partners												
Rules & Regulations - Installation Fee													
FLUSH GRANITE AND BRONZE. MONUMENTS & BENCHES ALLOWED IN DESIGNATED AREAS ONLY.													
MONUMENTS MUST BE 6" OR THICK. BRONZE MUST BE ON GRANITE BASE. ANY COLOR GRANITE													
BRONZE BASE ALLOWED. MAXIMUM BABY 20"x 10". FOUNDATION FEE BASED ON SIZE OF GRANITE.													
CEMETE	CEMETERY FEES: new pricing effective 10-7-24 MEMORIAL SURVEY LAYOUT INSPECTION ASSESSMENT FEE (MSLIA):												
				C	OMPANION/ BENO	CH/ PRIVATE COL	UMBARIA - \$1,499.00	)					
Foundation	Foundation Fee: \$1.00 PSI Payable to Acacia Park SINGLE/ BOULDER/ CREMATION MEMORIAL - \$899.00												
	(in addition to					BY/ INFANT/ PET - \$499.00							
INCH ME	MORIALS SETTING FEE:		•			,,	0.00						
	MORIALO OLI TINO I LL.	ψ1.001 Ο	payable to	mon womona	10								
ALL 017E	C DENCHES & MONITME	NTO NEE		DDDOVAL ED	OM CEMETERY								
ALL SIZE	S, BENCHES & MONUME	IN I S INEE	D PRIOR A	PPROVAL FR	OW CEWIETERY								
			_										
MINIMUM	SIZE FOR COMPANION	IS 36"x 12	."										
Notes: # 0	OF FULL BURIALS PER GRA	AVE: CALL (	CEMETERY I	REGARDING W	/HAT IS ALLOWED.								
											1		
Flagging	Fee Payable to:					Spring delivery	begins (date):						
OAKVIEW	/ CEMETERY					WEATHER PERI	MITTING (NORMALL)	/ APRIL	_ 15TH	l)			
(SAME A	DDRESS AS ABOVE)					Fall/Winter Deliv	very "cutoff" (date):						
						WEATHER PERI	MITTING (CALL FIRS	T)					

# OAKWOOD - FARMINGTON

A -l -l	24000 ODAND DIVED					Farma Danvinado	Yes		l	V		
	s 34200 GRAND RIVER					Form Required:			No	X		
City	FARMINGTON	State	MI	Zip	48335	Grave Location Required on Memorial:			No No	X		
Phone	(248) 474-5500					Symbol Required on Memorial: Yes						
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. 5	-5500		Borders Required on Foundation:	Yes		No	Х		
Rules & Regulations - Installation Fee												
GRANITE & BRONZE. CALL FOR MONUMENTS. BRONZE MUST BE MOUNTED ON GRANITE ONLY (NO CEMENT) BEFORE DELIVERY TO												
CEMETERY. FAMILY TO VERIFY LOCATION WITH CLERK. MUST CALL BEFORE DELIVERY.												
FOUNDA <sup>*</sup>	TION FEE:											
	JP TO 42"x 18" - \$175.00											
	UP TO 60"x 18" - \$300.00											
	LARGER THAN 60"x 18"											
.50 1 51 11	LANGER HIAN 00 X 10											
MUST OV	VN 4 GRAVES FOR A MOI	NUMENT (	OR BENCH	AND MUST B	E CENTERED OV	ER THE 4 GRAVES.						
SLANTS A	ALLOWED.											
https://wv	vw.farmgov.com/City-Servi	ces/City-Cl	erk/Oakwoo	od-Cemetery.a	SDX							
	OF FULL BURIALS PER GRA			•		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	GTON, MI 48335 WEATHER PERMITTING											

# OAKWOOD - FENTON

Phone (810) 629-2261 - CITY OF FENTON Symbol Required on Memorial: Yes No X Fax (810) 629-2204 - CITY OF FENTON If yes, what symbol?  Email climan@covenantcemetery.com Benches Permitted: Yes X No X JUDY (Mondays) - (810) 694-4101  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  Spring delivery begins (date):  APRIL 15TH  APRIL 15TH	Address	(810) 629-2261 - CITY OF FENTON (810) 629-2004 - CITY OF FENTON  cfirman@covenantcemetery.com  CATHY FIRMAN (Tues-Sat) JUDY (Mondays) - (810) 694-4101  Rules & Regul  GRANITE (SAWN SIDES), BRONZE, BEVELS, SLANTS, MON ND IS FLUSH ONLY - 16"x 8"x 4".  ATION FEE: .75 PSI - MINIMUM \$216.00  RIAL PURCHASES/ARRANGEMENTS, CONTACT: SBEE ENANT CEMETERY SERVICE					Form Required:	l: Yes No					
Fax (810) 629-2004 - CITY OF FENTON   If yes, what symbol?    Email   cfirman@covenantcemetery.com   Benches Permitted:   Yes   X   No   X    Contact   CATHY FIRMAN (Tues-Sat)   Borders Required on Foundation:   Yes   X   No   X    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  Spring delivery begins (date):   APRIL 15TH	City	FENTON	State	MI	Zip	48430	Grave Location Required on Memorial:	Yes		No	Х		
Email cfirman@covenantcemetery.com  Benches Permitted: Yes X No X  Contact CATHY FIRMAN (Tues-Sat) JUDY (Mondays) - (810) 694-4101  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  Spring delivery begins (date):  APRIL 15TH	Phone	` ,					Symbol Required on Memorial:	Yes		No	Х		
Contact CATHY FIRMAN (Tues-Sat) JUDY (Mondays) - (810) 694-4101  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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY	Fax	(810) 629-2004 - CITY OF	FENTON				If yes, what symbol?			-			
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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Spring delivery begins (date):  APRIL 15TH	Email	cfirman@covenantcemete	ery.com				Benches Permitted:	Yes	Х	No			
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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH	Contact						Borders Required on Foundation:	Yes		No	Х		
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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH				Ru	les & Regulat	ions - Installation	Fee						
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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH	FLUSH G					JMENTS.							
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 Fee Payable to: OAKWOOD CEMETERY Mail to: OAKWOOD CEMETERY  APRIL 15TH	BABYLAN	YLAND IS FLUSH ONLY - 16"x 8"x 4".											
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 Fee Payable to: OAKWOOD CEMETERY Mail to: OAKWOOD CEMETERY  APRIL 15TH	INSTALLA												
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 Fee Payable to: OAKWOOD CEMETERY Mail to: OAKWOOD CEMETERY  APRIL 15TH													
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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH	FOR BUR	FOR BURIAL PURCHASES/ARRANGEMENTS, CONTACT:											
(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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH	BARB BIS	BARB BISBEE											
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 Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH	AT COVE	NANT CEMETERY SERVI	CE										
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH	(810) 577	-1184											
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH													
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH													
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH													
Installation Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH  Spring delivery begins (date):  APRIL 15TH	Cathy Firr	nan cfirman@covenantcen	netery.com										
Installation Fee Payable to: OAKWOOD CEMETERY  Mail to: OAKWOOD CEMETERY  APRIL 15TH  Spring delivery begins (date):  APRIL 15TH													
Mail to: OAKWOOD CEMETERY  APRIL 15TH	Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAIN	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE						
Mail to: OAKWOOD CEMETERY  APRIL 15TH	Installatio	on Foo Payable to: OAK	NOOD CE	METEDY			Spring delivery begins (date):						
2020 E. HILL RD.  GRAND BLANC, MI 48439  WEATHER PERMITTING							Fall/Winter Delivery "cutoff" (date):						

# <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://wwv	v.ortonvillecemetery.com/p	Phone ricing.html				Borders Required on Foundation:	Yes		No	Х
			F	Rules & Regulati	ons - Installation	Fee				
FLUSH, E	BEVELS, SLANTS. FOUNI	DATIONS A	ARE 12" T	THICK WITH 24"	POST DOWN CE	NTER.				
FOUNDA	TION FEE: .50 PSI PLUS	\$175.00 B	ASE FEE	. CALL FOR MO	NUMENTS.					
Notes: #	OF FULL BURIALS PER GR	AVF:1 # ()	F CREMA	INS PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
1101001 11	OT FOLL BOTH ALOT LIN OTH		T OI LEWIN		2 01( 11 022 7110	ONE WINTER CIVITE				
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>

City BELLEVILLE  State  MI  Zip  48111  Grave Location Required on Memorial: Yes  No  X Phone  (734) 699-8900 ext 6  Symbol Required on Memorial: Yes  No  X  Fax  (734) 699-5213	Address						Form Required:	Yes		No	Х
Fax (734) 699-5213	City	BELLEVILLE	State	MI	Zip	48111	Grave Location Required on Memorial:	Yes		No	Χ
Email bbeaudry@vanburen-mi.org Benches Permitted: Yes No X Contact BRITTANY BEAUDRY Phone (734) 699-8909 Borders Required on Foundation: Yes X No No Note: Benches must not exceed size of grave  Rules & Regulations - Installation Fee CHARTER TOWNSHIP OF VAN BUREN, KIRK, CHUCK OR SAM, TO STAKE GRAVE. THE FAMILY IS RESPONSIBLE FOR FOUNDATIONS. BENCHES MUST NOT EXCEED SIZE OF GRAVE. NO SUNDAY OR HOLIDAY BURIALS.  INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):	Phone	` ,					Symbol Required on Memorial:	Yes		No	Х
Contact BRITTANY BEAUDRY Phone (734) 699-8909  Borders Required on Foundation: Yes X No Note: Benches must not exceed size of grave  Rules & Regulations - Installation Fee  CHARTER TOWNSHIP OF VAN BUREN, KIRK, CHUCK OR SAM, TO STAKE GRAVE. THE FAMILY IS RESPONSIBLE FOR FOUNDATIONS. BENCHES MUST NOT EXCEED SIZE OF GRAVE. NO SUNDAY OR HOLIDAY BURIALS.  INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  ROTE STATES TOWNSHIP OF VAN BUREN 46425 TYLER ROAD	Fax	(734) 699-5213					If yes, what symbol?			_	
Rules & Regulations - Installation Fee  CHARTER TOWNSHIP OF VAN BUREN, KIRK, CHUCK OR SAM, TO STAKE GRAVE. THE FAMILY IS RESPONSIBLE FOR FOUNDATIONS. BENCHES MUST NOT EXCEED SIZE OF GRAVE. NO SUNDAY OR HOLIDAY BURIALS.  INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN  46425 TYLER ROAD  **Note: Benches must not exceed size of grave  Installation Fee  Rules & Regulations - Installation Fee  Rules & Regulations - Installation Fee  CHARTER TOWNSHIP OF VAN BUREN  APRIL 1ST  Fall/Winter Delivery "cutoff" (date):	Email	bbeaudry@vanburen-mi.c	org				Benches Permitted:	Yes		No	Х
Rules & Regulations - Installation Fee  CHARTER TOWNSHIP OF VAN BUREN, KIRK, CHUCK OR SAM, TO STAKE GRAVE. THE FAMILY IS RESPONSIBLE FOR FOUNDATIONS. BENCHES MUST NOT EXCEED SIZE OF GRAVE. NO SUNDAY OR HOLIDAY BURIALS.  INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  REAL STATES TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  REAL STATES TOWNSHIP OF VAN BUREN 46425 TYLER ROAD	Contact	BRITTANY BEAUDRY	Phone	(734) 699-	8909		Borders Required on Foundation:	Yes	Х	No	
CHARTER TOWNSHIP OF VAN BUREN, KIRK, CHUCK OR SAM, TO STAKE GRAVE. THE FAMILY IS RESPONSIBLE FOR FOUNDATIONS.  BENCHES MUST NOT EXCEED SIZE OF GRAVE. NO SUNDAY OR HOLIDAY BURIALS.  INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  STRING delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):							*Note: Benches must not exceed	size of	grave		
BENCHES MUST NOT EXCEED SIZE OF GRAVE. NO SUNDAY OR HOLIDAY BURIALS.  INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):				Rul	es & Regulat	ions - Installation	Fee				
INCH TO INSTALL FOUNDATIONS: \$1.00 PSI  FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):	CHARTE	R TOWNSHIP OF VAN BU	REN, KIR	K, CHUCK C	R SAM, TO S	TAKE GRAVE. TI	HE FAMILY IS RESPONSIBLE FOR FO	UNDAT	TIONS.		
FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):	BENCHES	S MUST NOT EXCEED SIZ	ZE OF GR	AVE. NO S	JNDAY OR H	OLIDAY BURIALS					
FOUNDATION FEE: \$50.00 (MARKING AND INSPECTION)  Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):											
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):	INCH TO	INSTALL FOUNDATIONS:	\$1.00 PSI								
Notes: # OF FULL BURIALS PER GRAVE: 1 # OF CREMAINS PER GRAVE: 2 OR 1 FULL AND 1 CREMATION PER GRAVE  Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD  Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):	FOUNDA <sup>-</sup>	TION FEE: \$50.00 (MARK	ING AND I	NSPECTIO	N)						
Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only  CHARTER TOWNSHIP OF VAN BUREN  46425 TYLER ROAD  Spring delivery begins (date):  APRIL 1ST  Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only  CHARTER TOWNSHIP OF VAN BUREN  46425 TYLER ROAD  Spring delivery begins (date):  APRIL 1ST  Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only  CHARTER TOWNSHIP OF VAN BUREN  46425 TYLER ROAD  Spring delivery begins (date):  APRIL 1ST  Fall/Winter Delivery "cutoff" (date):											
Installation Fee Payable to: Checks Only CHARTER TOWNSHIP OF VAN BUREN 46425 TYLER ROAD Spring delivery begins (date): APRIL 1ST Fall/Winter Delivery "cutoff" (date):	Notes: #	OF FULL BURIALS PER GRA	∆VF·1 #∩	F CREMAINS	S PER GRAVE.	2 OR 1 FULL AND	I CREMATION PER GRAVE				
CHARTER TOWNSHIP OF VAN BUREN  46425 TYLER ROAD  APRIL 1ST  Fall/Winter Delivery "cutoff" (date):		O OLL BOILINEO I EIL OIL		. 31(21)) (114)	J. LICOLOUVE.	Z OR THOLE MAD	OKERS CHOICE EX GIVIVE				
CHARTER TOWNSHIP OF VAN BUREN  46425 TYLER ROAD  APRIL 1ST  Fall/Winter Delivery "cutoff" (date):	Installatio	on Fee Payable to: Check	s Only				Spring delivery begins (date):				
46425 TYLER ROAD Fall/Winter Delivery "cutoff" (date):		-	-				' ' ' ' ' '				

## <u>OTTAWA PARK</u>

Address	6180 DIXIE HIGHWAY					Form Required: FORM Yes						
City	CLARKSTON	State	MI	Zip	48346	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@covenantce	emetery.com	_			Benches Permitted:	Yes	Χ	No			
						Borders Required on Foundation:	Yes		No	Х		
				Rules & Reg	julations - Installa	tion Fee						
FOUNDA	TION FEE:											
FLUSH M	ARKERS - 1.50 PSI, MII	NIMUM OF \$	432.00									
BEVELS,	SLANTS, BENCHES AN	ID MONUME	ENTS - \$	1.50 PSI MIN	IMUM of \$432.00							
	OUBLE INTERMENT SITES REQUIRE A 16"x 24" DOUBLE INTERMENT MEMORIAL OF GRANITE AND/OR RONZE ON GRANITE.											
ALL BEN	CHES, MONUMENTS, S	SLANT MAR	KERS AI	ND BRONZE I	MARKERS MUST I	HAVE A <b>Matching</b>						
GRANITE	BASE. THEY WILL NO	OT BE ACCE	PTED V	VITHOUT A M	IATCHING BASE.							
VASES M	IUST BE PREAPPROVE	D. 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						
Installation	on Fee Payable to:					Spring delivery begins (date):						
OTTAWA	PARK CEMETERY					WEATHER PERMITTING						
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):						
						WEATHER PERMITTING						

#### **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	Χ
Phone	(734) 285-2155					Symbol Required on Memorial:	Yes		No	Χ
Fax	(734) 285-6510					If yes, what symbol?				
Email	mariles.lori@aodcemeteri	es.org				Benches Permitted:	Yes	Χ	No	
	LORI MARILES	Phone	(734) 285-			Borders Required on Foundation:	Yes		No	Χ
Back up	JULIE SENKOWSKI - ser	nkowski.ju	lie@aodce	meteries.org						
			Ru	les & Regulati	ions - Installation	Fee				
ONLY GR	ANITE MARKERS ALLOW	/ED (NO B	RONZE) AN	ND MUST BE A	APPROVED BY C	EMETERY. 24"x 12"x 4" ON A 48"x 12"x	<b>4</b> "			
ALL MON	UMENTS, BENCHES AND	DRAWING	GS MUST E	BE APPROVED	O IN ADVANCE. N	NO MONUMENTS IN SECTION 4. NO M	ONUME	NTS		
GREATER	R THAN 7'. STAINLESS ST	ΓEEL AND	LASER PH	OTOS ALLOW	/ED. NO VASES A	ALLOWED OTHER THAN WHAT CEME	TERY AL	LOW	/S.	
NO SLAN	TS, HALF LEDGERS OR L	EDGERS A	ALLOWED							
FOUNDAT	ΓΙΟΝ FEE:									
16"x 10"x	4" OR 18"x 10"x 4" - \$300.	00 INFANT	-							
FLUSH 24	4"x 12"x 4" - \$475.00									
FLUSH 48	3"x 12"x 4" - \$630.00									
MONUME	NTS - <b>WITH PRIOR APP</b>	ROVAL AN	D ADDITIO	NAL LOT UPO	GRADE FEE:					
BASE 24"	x 12" - \$500.00 - 1 GRAV	/E								
BASE 48"	x 14" - \$1,000.00 - 2 GR	AVES								
BASE 60"	x 14" - \$1,250.00 - 4 GRA	AVES								
Notes: #	OF FULL BURIALS PER G	GRAVE: 1	# OF CREI	MAINS PER G	RAVE: 5					
· ·	· · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·				

Installation Fee Payable to:

OUR LADY OF HOPE

(SAME ADDRESS AS ABOVE)

Spring delivery begins (date):

APRIL 1ST

Fall/Winter Delivery "cutoff" (date):

OCTOBER 31ST

## OXBOW LAKESIDE

Addrose	ELIZABETH LAKE RD.					Form Required:		Yes		No	Х
		State	MI	7in		·	ed on Mamarial			No	
City	WHITE LAKE	State	MI	Zip		Grave Location Requir				1	X
Phone Fax	(248) 887-6700 (248) 887-4487					Symbol Required on M		Yes		No	Χ
Email	(240) 001 4401					If yes, what symbol?				1	
Eman						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	der on all sides				
			Rul	es & Regulations - In	stallation	Fee					
\$0.75 PS	OF FOUNDATION										
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CREM	IATION BURIALS PER	R GRAVE:	2-4					
l (C	ALL MIKE @ HURON CEN	ЛЕТЕRY М	AINTFNAN	CE FIRST)							
				<u></u>							
Installati	on Fee Payable to:					Spring delivery begir	ns (date):				
HURON (	HURON CEMETERY MAINTENANCE			WEATHER PERMITTING							
P.O. BOX 112					Fall/Winter Delivery "	cutoff" (date):					
	ID, MI 48357					WEATHER PERMITTI					

#### **OXFORD TOWNSHIP**

Address	300 DUNLAP ROAD					Form Required:	Yes	No	Χ
City	OXFORD	State	MI	Zip	48371	Grave Location Required on Memorial:	Yes	No	Х
Phone	(248) 628-9787					Symbol Required on Memorial:	Yes	No	Х
Fax	(248) 628-8139					If yes, what symbol?			
Email	krichter@oxfordtownship.	org				Benches Permitted:	Yes	No	Х
Contact	KELLY RICHTER @ TOWN HA	ւ Phone	(248) 628	-9787		Borders Required on Foundation:	Yes	No	Х

#### Rules & Regulations - Installation Fee

FOUNDATION FEE: .75 PSI, \$150.00 MINIMUM - PRICE INCLUDES THE FOUNDATION AND INSTALLATION (as of 1-1-25)

Size	<u>Price</u>	<u>Size</u>	<u>Price</u>	<u>Size</u>	<u>Price</u>	
18"x 10"	\$150.00	40"x 20"	\$600.00	52"x 18"	\$702.00	PRICE IS CALCULATED BY THE SIZE OF THE BASE
24"x 12"*	\$216.00	42"x 12"	\$378.00	54"x 20"	\$810.00	MEASUREMENT OF THE MONUMENT
28"x 16"*	\$336.00	42"x 18"	\$567.00	60"x 18"	\$810.00	
28"x 18"**	\$378.00	44"x 20"	\$660.00	60"x 24"	\$1,080.00	
30"x 16"	\$360.00	46"x 12"	\$414.00	68"x 24"	\$1,224.00	
32"x 12"	\$288.00	48"x 18"***	\$648.00	72"x 24"	\$1,296.00	
32"x 20"	\$480.00	50"x 20"	\$750.00	80"x 24"	\$1,440,00	

84"x 24"

\$1,512.00

\$486.00

36"x 18"

**GENESEE VALLEY VAULT PUTS IN** \*\*\* = DOUBLE BRONZE WITH VASE

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

\$468.00

Installation Fee Payable to: CASH, CHECK OR CREDIT CARD IN OFFICE
OXFORD TOWNSHIP
300 DUNLAP RD.
OXFORD, MI 48371

52"x 12"

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

TOWNSHIP RUNS THE CEMETERY.

<sup>\* =</sup> ALSO AVAILABLE AS GOVERNMENT FOUNDATIONS

<sup>\*\* =</sup> BRONZE WITH VASE

#### PARKVIEW MEMORIAL

Installation Fee Payable to:

(SAME ADDRESS AS ABOVE)

PARKVIEW MEMORIAL CEMETERY

Address	34205 FIVE MILE RD.					Form Required: FORM	Yes	X	No				
City	LIVONIA	State	MI	Zip	48154	Grave Location Required on Mer	morial: Yes	Х	No				
Phone	(734) 421-6120					Symbol Required on Memorial	: Yes	Х	No				
Fax	(734) 421-5109					If yes, what symbol? LOT NUI	MBER		_				
Email	info@parkviewlivonia.com	<u>.</u>				Benches Permitted:	Yes		No	Х			
Contact	ERIN (office manager) MARY STOCK (markers)	mary@pa	<u>rkviewlivon</u>	a.com		Borders Required on Foundation	n: Yes		No	Χ			
			Ru	les & Regulati	ions - Installation	Fee							
NO GRAN	IITE BASES FOR BRONZ	E MARKE	R <b>S</b> , BRONZ	E CAST PHO	TOS ONLY - NO F	RAISED PHOTOS. FLI	USH <u>GRANI</u> T	E MAI	RKERS	;			
MUST HA	VE PHOTO WAIVER FRO	M GRAVE	OWNER.	NO LONGER F	REFINISH BRONZ	<b>E</b> ALI	LOWED IN 2	SIZES	-				
NO VASE ON 24"x 12". VASES ARE ALLOWED ON 24"x 13" & 24"x 14"						24"	'x12"x 4" and	d					
FOUNDAT	ΓΙΟΝ FEE FOR 16"x 24" - Ι	DOUBLE IN	NTERMENT	T - \$300.00 + 6	6% SALES TAX	36"	'x 12"x 4" ON	LY.					
24"x 12" C	OR 24"x 14" - \$250.00 + 6%	SALES TA	AX = \$265.0	00		INS	STALLATION	FEES:					
VA MARK	ER - \$250.00 + 6% SALES	TAX				24"	'x 12"x 4" - \$2	00.00	(no tax)	)			
24"x 30" V	VITH OR WITHOUT VASE	AND HAL	F LEDGER	- \$300.00 + 69	% SALES TAX	36"	'x 12"x 4" - \$3	00.00	(no tax)	)			
FULL LED	GERS ARE ACCEPTED V	NITH PER	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 GRAVI	ES									
2 NAMES	ON SINGLE MARKER - C.	AN USE 24	1"x12" or 24	-"x 14"									
3 MARKE	RS ALLOWED ON 1 GRAV	/E - 3RD N	MARKER @	FOOT OF TH	IE GRAVE								
MUST HA	VE LOT NUMBER CAST	ON LOWE	R RIGHT H	AND CORNER	R OF THE MEMOR	RIAL.							
Notes: #0	OF FULL BURIALS PER GRA	VE: 1 # OI	F CREMAIN:	S PER GRAVE:	3 OR 1 FULL AND 2	2 CREMAINS PER GRAVE							

Spring delivery begins (date):

APRIL 15TH

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 1st (NO WINTER DELIVERY)

#### **PARSHALLVILLE**

P.O. BOX 112

HIGHLAND, MI 48357

Address		Form Required:	Y	es/		No	Х	
City	HARTLAND TOWNSHIP State MI Zip	Grave Location Required on	Memorial: Y	'es		No	Х	
Phone	(248) 887-6700	Symbol Required on Memor	ial: Y	⁄es		No	Х	
Fax	(248) 887-4487	If yes, what symbol?		- ,				
Email		Benches Permitted: Call	contact Y	⁄es		No		
Contact	MIKE WILLENBERG @ Phone (248) 887-6700	Borders Required on Foundation	ation: Y	⁄es [	Χ	No		
НСМ	HURON CEMETERY MAINTENANCE	2" border on	all sides					
	Rules & Regulations - Ins	stallation Fee						
BRONZE	, FLUSH GRANITE, SLANTS, AND MONUMENTS - 36" MAX PER GRA	VE						
GOVERN	MENT ISSUED MARKERS - ALL TYPES\$250.00							
FLUSH S	LUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)							
\$0.50 PS	I, MINIMUM \$175.00							
FOUNDA	TION FEE FOR MONUMENTS & BRONZE ON CONCRETE (NON VA)							
\$0.70 PS	OF FOUNDATION, MINIMUM \$250.00							
ALL FOU	NDATIONS MUST BE 2" LARGER ON ALL SIDES THAN MONUMENT I	BASE.						
ADD 4" T	O LENGTH AND WIDTH OF BASE TO DETERMINE 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 VASE)						
Notes: #	OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER	GRAVE: 2-3						
(C	ALL MIKE @ HURON CEMETERY MAINTENANCE FIRST)							
Installation	on Fee Payable to: <u>CASH, CHECK</u>	Spring delivery begins (da	te):					
HURON (	CEMETERY MAINTENANCE <u>CC VIA PHONE</u>	WEATHER PERMITTING	WEATHER PERMITTING					

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

#### PERRY MOUNT PARK

(SAME ADDRESS AS ABOVE)

											_	
Address	878 NORTH PERRY ST.					Form Requir	ed: FORM		Yes	Х	No	
City	PONTIAC	State	MI	Zip	48340	Grave Locat	ion Required	on Memorial:	Yes		No	Х
Phone	(248) 334-1563					Symbol Req	uired on Men	norial:	Yes		No	Х
Fax	(248) 334-1872					If yes, wha	at symbol?				_	
Email	PERRYMOUNTPARK@A	TT.NET				Benches Pe	rmitted:	Call first	Yes	Х	No	
Contact		Phone	(248) 334	-1563		Borders Rec	uired on Fou	ndation:	Yes		No	Х
			Ru	les & Regulat	ions - Installation	Fee						
FLUSH O	NLY, GRANITE OR BRON	ZE. NO P	ICTURES A	LLOWED. PH	HOTOS ARE TO B	E EITHER ET	CHED OR					
INSERTE	D. NO COLOR OR CERAI	MIC. BRO	NZE OR GI	RANITE CAN I	BE PURCHASED I	IN ALL SECT	IONS.					
MONUME	ENTS IN DESIGNATED AR	EAS MUS	T BE 6" OR	8" MINIMUM	LENGTH BASE OI	F 3'4" AND M	UST OWN					
MONUME	ENT SPACE. ANY COLOR	GRANITE	BASES AL	LOWED. TW	O SINGLE BRONZ	ZE MAY BE M	OUNTED					
ОИ СОМ	PANION GRANITE BASE.					30'	' MAX FOR SIN MAX FOR DO	GLES				
FOUNDA	TION FEE:					60"	MAX FOR DOI	JBLES				
FOUNDAT	IONS CALCULATED AT: LEN	IGTH (see I	red chart on	right>) X WII	OTH (18") X 1.00		DATION FEES:					
24"x 12"x 4	1", 20"x 10"x 4", 12"x 12" - \$32	25.00					32" - \$576.00 = 34" - \$612.0					
COMPANI	ON FLUSH MARKERS - \$600	.00				3' 0" =	36" - \$648.00 40" - \$720.00	4' 4" = 52	" - \$ <del>9</del> 36	6.00		
BRONZE S	SAME PRICING AS GRANITE					3' 6" =	42" - \$756.00	4' 8" = 56	" - \$100	08.00		
MONUME	NTS CALL FOR PRICING.						44" - \$792.00 = 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	PER GRAVE: 3	3 OR 1 FULL AND 2	CREMAINS PI	ER GRAVE				5/	1/2024
Installation	on Fee Payable to:					Spring deliv	ery begins (	date):				
PERRY M	OUNT PARK CEMETERY					YEAR ROU	ND DELIVER	Υ				

Fall/Winter Delivery "cutoff" (date):

YEAR ROUND DELIVERY

# **PINCKNEY**

Address	WEST MAIN STREET (W	EST M-36	)			Form Required:	Yes	Х	No	
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	Х	No	
Contact	GARY NICHOLAS (Sexton)	Phone	(734) 8	78-2940		Borders Required on Foundation:	Yes	Χ	No	
						2" border required on all side	S			
			F	Rules & Regula	tions - Installation	Fee				
FOUNDA	TION FEE:									
.50 PSI P	LUS 2" ON EACH SIDE, \$2	200.00 MIN	IIMUM							
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OI	FCREMA	INS PER GRAVE:	: 2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
GARY NI	CHOLAS					MAY 15TH				
832 PUTN	IAM ST.					Fall/Winter Delivery "cutoff" (date):				
PINCKNE	Y, 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	red on Memorial:	Yes		No	Х
Phone	(248) 496-9948					Symbol Required on M	lemorial:	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)	496-9948		Borders Required on F	oundation:	Yes	Х	No	
						2" bore	der on all sides				
				Rules & Re	gulations - Installatio	n Fee					
BRONZE	, FLUSH GRANITE, SLAN <sup>-</sup>	TS, AND N	/ONUME	ENTS - 30" N	MAX PER GRAVE						
GOVERN	MENT ISSUED MARKERS	3 - ALL TY	PES	\$250.00			30" MAX	FOR SI	NGLES		
FLUSH S	ETTING OF GRANITE & B	RONZE C	N GRAN	NITE (NO FC	OUNDATION)		60" MAX				
\$0.65 PSI	I, MINIMUM \$175.00 - ADD	\$40.00 F	OR BUIL	_T IN VASE							
FOUNDA	TION FEE FOR MONUME	NTS & BR	ONZE C	N CONCRE	TE (NON VA)						
\$0.80 PSI	OF FOUNDATION, MININ	ЛUM \$300.	.00								
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL S	SIDES THAN	MONUMENT BASE.						
ADD 4" T	O LENGTH AND WIDTH C	OF BASE T	O DETE	ERMINE FOL	JNDATION SIZE NEED	DED.					
ADD \$40.	.00 FOR BUILT IN VASE										
MISCELL	ANEOUS ITEMS										
CORNER	MARKERS (SET OF 4)	\$150.00									
VASE ON	ILY	\$100.00	0								
Notes: #	OF FULL BURIALS PER (	3RAVE: 1	# OF C	REMATION	BURIALS PER GRAVE	: 2-3					
										4-5	-23
Installatio	on Fee Payable to: CAS	3H or CHE	CKS ON	NLY - Made	out to:	Spring delivery begin	ns (date):				
MARI BEI	M					WEATHER PERMITT	ING				
PO Box 1	22					Fall/Winter Delivery '	'cutoff" (date):				
MILFORD	D, MI 48381					WEATHER PERMITT	ING				

#### PLEASANT VALLEY

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

									_	
Address	W. SIDE OF PLEASANT VA	LLEY RD, N	N. OF JAC	OBY RD.	Form Required:		Yes	<u> </u>	No	Χ
City	BRIGHTON	State	MI	Zip	Grave Location Requi	red on Memorial:	Yes	<u> </u>	No	Х
Phone	(248) 887-6700				Symbol Required on N	/lemorial:	Yes	<u> </u>	No	Χ
Fax	(248) 887-4487				If yes, what symbol?				_	
Email					Benches Permitted:	Call contact	Yes	<u> </u>	No	
Contact	MIKE WILLENBERG @		<b>e</b> (248) 88	37-6700	Borders Required on F	oundation:	Yes	Х	No	
НСМ	HURON CEMETERY MA	INTENANO	CE		2" bore	der on all sides				
			R	tules & Regulations - Ins	tallation Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	IONUMEN	ITS.						
GOVERN	MENT ISSUED MARKERS	S - ALL TYI	PES\$2	<u>250.00</u>						
FLUSH SE	ETTING OF GRANITE & B	RONZE O	N GRANI	TE (NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BR	ONZE ON	I CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIE	DES THAN MONUMENT E	BASE.					
ADD 4" T0	D LENGTH AND WIDTH C	OF BASE T	O DETER	MINE 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 \$5	0.00 FOR ALL FEES FOR	BUILT IN VASE)					
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRI	EMATION BURIALS PER	GRAVE: 2					
(C	ALL MIKE @ HURON CEN	METERY M	1AINTEN <i>A</i>	ANCE FIRST)						
Installatio	on Fee Payable to:	CASH, CI	HECK		Spring delivery begin	ns (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

#### 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 Require	ed on Memorial:	Yes		No	Х
Phone						Symbol Required on M	lemorial:	Yes		No	Х
Fax						If yes, what symbol?			T	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	Χ
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	Х

#### **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 - \$800.00

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 - For Delivery Approval

from Dec 1 - Mar 31, please contact: Jason Dalenberg 586-201-8295 or Dan Gonzalez @ 586-719-3653 or Tim Burrows @ 586-246-9735

# <u>RICHMOND</u>

								1	
Address	M-19, N OF 33 MILE RD.					Form Required:	Yes	No	Χ
City	RICHMOND	State	MI	Zip	48062	Grave Location Required on Memorial:	Yes	No	Х
Phone	(586) 727-7571 X 201					Symbol Required on Memorial:	Yes	No	Х
Fax	(586) 727-2489					If yes, what symbol?			
Email	akent@cityofrichmond.ne	<u>t</u>				Benches Permitted:	Yes	No	Х
Contact	AGATHA KENT	Phone	(586) 727	-7571 EXT 201	I	Borders Required on Foundation:	Yes	No	Х
			Ru	iles & Regulat	ions - Installatior	n Fee			
FOUNDA	TION FEE: -								
\$40.00 PI	ER CUBIC FOOT.								
Pet Ceme	etery Foundation Fee:								
\$75.00									
Notes: V	VITH A CASKET BURIAL, 2	2 CREMAIN	NS ARF AI	I OWFD - (1 A	T THE HEAD AND 1	AT THE FOOT)			
				(					
Installation	on Fee Payable to:					Spring delivery begins (date):			
CITY OF	RICHMOND					APRIL 15TH			
36725 Div	vision Rd.					Fall/Winter Delivery "cutoff" (date):			
RICHMO	ND, MI 48062					OCTOBER 15TH			

#### RIDDLE CEMETERY

Address	1577 NORTH LATSON R	D.				Form Required: Yes No X	<u> </u>
City	HOWELL	State	MI	Zip	48843	Grave Location Required on Memorial: Yes No	
Phone						Symbol Required on Memorial: Yes No	
Fax						If yes, what symbol?	
Email	clerk@oceaolatwp.org					Benches Permitted: <i>Designated areas</i> Yes No	
Contact	JAMIE CLAY - CLERK	Phone	(517) 202	2-7445		Borders Required on Foundation: Yes No	
	KIETH HUFF - SEXTON	Phone	(517) 546	6-3259			
			Rı	ıles & Regula	ations - Ir	stallation Fee	
FOUNDA	TION FEE:						
\$0.65 PEI							
FOUNDA	TIONS TO BE INSTALLED	BY OCEO	DLA TOWN	ISHIP			
THE FOU	NDATION FOR MEMORIA	AL PLAQUI	ES OR HEA	ADSTONES F	PROVIDEI	D BY THE VETERANS ADMINISTRATION ON THE GRAVES OF	
  VETERAI	NS: THE TOWNSHIP WILL	PAY THE	COST FO	R THE FOUN	IDATION	OF A 1-FOOT BY 2-FOOT HEADSTONE IN AN OCEOLA	
	IIP OWNED CEMETERY,						
	• • • • • • • • • • • • • • • • • •						
Notos: #	OF FULL BURIALS PER (	2DA\/E+ 1	# OF CDE	MAINIC DED	CDAVE: 1		
Notes. #	OF TOLL BURNALS FER C	JINAVL. I	# OF CIVE	IVIAINO FEIX	GRAVE. 2	<u>-</u>	_
Installation	on Fee Payable to:					Spring delivery begins (date):	
	TOWNSHIP					Fall/Winter Delivery "cutoff" (date):	
	RTH LATSON RD.						
	, MI 48843						

## RIVER REST

(SAME ADDRESS AS ABOVE)

Address	G-4413 FLUSHING ROAD (	PART OF S	UNSET HI	LLS)			Form Required: FORM	Yes	Χ	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?			7	
Email	sha@sunsethills.com						Benches Permitted:	Yes		No	Χ
Contact	DEBE McCORD	Phone	(810) 73	32-0260			Borders Required on Foundation:	Yes		No	Χ
			F	Rules & Regu	ılations - Ins	tallation	Fee				
FLUSH G	RANITE AND BRONZE. I	MONUMEN	TS ALLO	WED IN SEC	CTIONS A-C-1	1-3-5, 1-R	t, 2-R & 3-R AND MUST				
BE 5 GRA	AVE LOTS. CALL CEMET	ERY FOR S	SPECIFIC	INFORMATI	ION ON MON	UMENTS	S. NO CAMEOS				
ALLOWE	D. JET BLACK WITH LAS	SER PHOTO	O ONLY.								
BASE MI	NIMUM 3'6"x 1'2"	BASE MA	XIMUM 6	6'4"x 1'6"							
DIE MINII	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	0.00 (INFA	NT)								
24"x 12" (	GRANITE or Bronze - \$272	2.00									
24"x 13" (	OR 14" BRONZE - \$272.00	(WITH OF	R WITHOU	UT VASE)							
54" x 12"	GRANITE - \$420.00 (COM	IPANION, C	ONLY SIZ	E ALLOWED	))						
44"x 13" (	OR 14" BRONZE - \$420.00	(COMPAN	IION, WI	TH OR W/O V	/ASE)						
Notes: #	OF FULL BURIALS PER GR	AVE: 1 # O	F CREMAI	NS PER GRAV	VE: 2 OR 1 FU	LL AND C	REMATION PER GRAVE				
Installatio	on Fee Payable to:						Spring delivery begins (date):				
SUNSET	HILLS CEMETERY						APRIL 15TH (MONDAY THRU FRIDAY	ONLY	<b>'</b> )		

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						Symbol Required on Memorial:	Yes	No	Χ
Fax						If yes, what symbol?			
Email						Benches Permitted:	Yes	X No	
Contact	JEROMY ZARKO	Phone	517-392	-3889		Borders Required on Foundation:	Yes	No	Χ
			R	ules & Regula	ations - Installatio	n Fee			
BRONZE,	, FLUSH GRANITE, SLAN	TS, BEVEL	S, AND M	ONUMENTS					
FOUNDA	TION FEE:								
	/INIMUM \$200.00								
ALL BASE	ES FOR MONUMENTS M	UST BE NO	) LONGER	R THAN 34" O	N A SINGLE GRAV	/E			
**ALL MA	RKERS ARE SUBJECT T	O THE API	PROVAL C	OR DENIAL OF	THE CEMETERY	BOARD.			
Notes: # (	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN	NS PER GRAVE	E: 2 OR 1 FULL AND	1 CREMATION PER GRAVE			
Installatio	on Fee Payable to: <u>CASH</u>	CHECKS	ONLY			Spring delivery begins (date):			
	- <del>-</del>		_			WEATHER PERMITTING			
						Fall/Winter Delivery "cutoff" (date):			
						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>V</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	ons - Installation	Fee			
BLOCK K	AND BLOCK O: FLUSH C	ONLY UP T	O 36"x 18"	- \$175.00. LA	RGER THAN 36"x	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>Y</u> (VA'S MUST B	E BRONZE AND			
WILL BE A	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 <sup>*</sup>	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. SEI	E ABOVE FO	)R	
36"x 10" Al	ND 36"x 12" ON A 42"x 18" BA	ASE - \$235.0	00			BLOCK K AND BLOCK O. BASE SIZE LAR	RGER THAN		
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" Al	ND 46"x 14" ON A 52"x 18" BA	ASE - \$275.	00			OVERALL SIZE.			
52"x 12" Al	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			
					<del></del>				
nstallatio	on Fee Payable to:	CASH, CH	IECK			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	X	No	
City	ROMEO	State	MI	Zip	48065	Grave Location Required on Memorial:	Yes	Χ	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.or	<u>rg</u>				Borders Required on Foundation:	Yes	Х	No	
	https://www.villageofrome	o.org/depa	rtments/ror	neo-village-cer	<u>metary/</u>	2" border on all sides				
			Ru	les & Regulat	ions - Installatioı	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	ion poured twice a year, w	veather pe	rmitting, b	y Memorial Da	ay and by Veteral	ns Day				
Notes: #	OF FULL BURIALS PER C	GRAVE: 1	# OF CRE	MAINS PER G	RAVE: 4					

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

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

#### **ROMULUS**

CITY HALL - CITY CLERK

1111 WAYNE RD. ROMULUS, MI 48174

Address	SHOOK RD.				Form Required: FORM		Yes	X	No		
City	ROMULUS	State	MI	Zip	Grave Location Required on	Memorial:	Yes		No	Х	
Phone	(734) 942-7540				Symbol Required on Memori	al:	Yes		No	Х	
Fax	(734) 942-7592				If yes, what symbol?						
Email	ebragg@romulusgov.com	•			Benches Permitted:		Yes	Х	No		
Contact	ELLEN BRAGG	Phone	(734) 942-	7540	Borders Required on Founda	ation:	Yes	Х	No		
	ROMULUS CITY HALL				2" border or	n all sides					
			Ru	les & Regulations - In	stallation Fee						
FLUSH, E	EVELS, SLANTS AND MO	NUMENT	<b>3</b> .								
CITY WIL	L STAKE THE GRAVE AT	NO CHAR	GE. (ORIG	INAL CEMETERY <b>FOR</b>	M TO SEAN MULLINS - smullins@ro	mulusgov	<b>/.com</b> ).				
INCH MEMORIALS TO INSTALL FOUNDATIONS FOR FLUSH ONLY. ALL OTHER MONUMENT FOUNDATIONS											
TO BE IN	TO BE INSTALLED BY RICK RUTHERFORD.										
\$0.75 PSI	- CALL RICK RUTHERFO	RD FOR M	10NUMENT	S							
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 - <b>CHEC</b>	K ONLY ar	nd COPY OF FORM!							
38455 Wa	abash										
ROMULU	S, MI 48174										
Notes: BE	NCHES ARE PERMITTED, H	IOWEVER <sup>1</sup>	THEY MUST	BE PLACED AT THE HE	AD, AND MUST MEET THE 45" PER						
SINGL	E GRAVE AND 90" PER DOL	JBLE GRAV	'E UNDER R	OMULUS MEMORIAL CE	METERY RULES & REGULATIONS.						
# OF FULL	. BURIALS PER GRAVE: 1 #	OF CREMA	INS PER GF	RAVE: 4 OR 1 FULL AND	2 CREMAINS PER GRAVE						
										•	
Mail Orig	inal Signed Cemetery For	m To:			Spring delivery begins (date	te):					

MARCH 1ST

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 1ST

# ROSE CENTER

								_	
Address	1/2 MI S. OF ROSE CENTER	R, W. SIDE	OF MILFORI	D 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	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
			Ru	les & Regulations - Installation	r Fee				
FLUSH, S	SLANTS, BEVELS & MONU	JMENTS							
FOUNDA	TION FEE:								
.60 PSI, \$	150.00 MINIMUM - Price ir	ncludes the	foundation	and installation (as of 1-1-25)					
Price is ca	alculated by the size of the I	base meau	rement of tl	he monument.					
									ļ
Notes: #	OF FULL BURIALS PER GRA	.VE: 1 # OF	F CREMAINS	S PER GRAVE: 2 OR 1 FULL AND 1	I 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	/II 48442				WEATHER PERMITTING				

#### ROSELAND PARK

									_	_		
Address	29001 N. WOODWARD					Form Required: MSLIA FORM	Yes	Χ	No			
City	BERKLEY	State	MI	Zip	48072	Grave Location Required on Memorial:	Yes		No	Х		
Phone	(248) 541-1154					Symbol Required on Memorial:	Yes		No	Х		
Fax	(248) 268-1507					If yes, what symbol?			=			
Email	chall@everstorypartners.c	<u>com</u>				Benches Permitted: See note below	Yes	Х	No			
	CHRIS HALL	Phone	(248) 541	-1154		Borders Required on Foundation:	Yes		No	Х		
Everstory	/ Partners											
Rules & Regulations - Installation Fee												
FLUSH B	RONZE AND GRANITE. E	BRONZE M	UST HAVE	GRANITE BAS	SE. BRONZE VAS	SES ALLOWED. ANY COLOR OF GRAI	NITE BE	RONZ	E			
BASES A	LLOWED. NO BEVELS O	R SLANTS	ALLOWED	. MONUMENT	S ALLOWED IN D	DESIGNATED AREAS.						
GRANITE	RANITE COMPANIONS ALLOWED.											
CEMETE	CEMETERY FEES: new pricing effective 10-7-24 MEMORIAL SURVEY LAYOUT INSPECTION ASSESSMENT FEE (MSLIA):											
	COMPANION/ BENCH/ PRIVATE COLUMBARIA - \$1,499.00											
Foundati	on Fee: \$1.00 PSI Payab	le to Rose	land Park	SIN	NGLE/ BOULDER/	CREMATION MEMORIAL - \$899.00						
	(in addition to I	MSLIA fee	)	VE	TERAN/ BABY/ IN	IFANT/ PET - \$499.00						
INCH ME	MORIALS SETTING FEE:	\$1.00 PSI	payable to	Inch Memorials	S							
ONLY ON	IE PERSONS NAME ON A	24x12. MI	N SIZE FOI	R ADULT DOU	BLE INTERMENT	IS 16x24 (2 NAMES PER MARKER)						
ONLY ST	AINLESS-STEEL CAMEOS	S ON FLUS	SH MEMOR	IALS								
MEMORIA	AL REMOVAL FEE: \$95.0	00										
*3' AND 4	BENCHES PERMITTED	DEPENDIN	IG ON SEC	TION. LARGE	R BENCHES PER	RMITTED IF SPACE						
ALLOWE	D. CALL FIRST. GRANIT	E BASE RI	EQUIRED.									
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAINS	S PER GRAVE: 3	3 OR 1 FULL AND 2	CREMATIONS PER GRAVE						
Installatio	on Fee Payable to:					Spring delivery begins (date):						
ROSELAN	ND PARK CEMETERY					MAY 1ST - WEATHER PERMITTING -	CALL I	FIRST				

Fall/Winter Delivery "cutoff" (date):

NOVEMBER 1ST (BUT FLEXIBLE - WEATHER PERMITTING)

## <u>RUBY</u>

NORTH STREET, MI 48049

									1				
Address	ABBOTTSFORD RD., EA	ST OF 627	2 ABBOTT	SFORD		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	Х			
Fax	(810) 985-3065					If yes, what symbol?			-				
Contact	STACEY SMITH (CLERK)		Phone	(810) 985-725	58	Benches Permitted:	Yes		No	Х			
	DREW SAUNDERS (SEXTON)		Phone	(810) 985-725	58	Borders Required on Foundation:	Yes	Х	No				
	JEFF KERN (SUPERVISOR)		Phone	(810) 985-725	58	2" border required (included in p	rice)						
	CATHY JOWETT (SECRETAR	Y)	Email	cathyj@clydet	townshipscc.org								
			Ru	les & Regulati	ions - Installation	Fee							
FLUSH, E	SEVELS, SLANTS AND MO	ONUMENTS	S.										
FOUNDA	TION FEE:												
.50 PSI, N	50 PSI, MINIMUM \$120.00 FOR UP TO 10" x 24"												
24"x 12" -	\$144.00												
	(1) monument, marker, or	memorial s	hall be perr	nitted per buria	ıl space "above gra	ade" Any other military							
	arker must be flush or belo			'	,	,							
		y. g. a.a.c.											
IF A HFA	DSTONE SHOWS UP WIT	HOUT A F	OUNDATIO	ON A \$500 FI	NE WILL BE ISSU	EDI							
/(!!=/(		110017(1	OUIDATIO	<del>уни ут фоос г и</del>	112 1112 DE 1000								
Natar #	05 5111 DUDIN 0 D5D 0D			) DED OD () (E. (		005WW0 050 00W5							
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAINS	S PER GRAVE: 4	OR 1 FULL AND 1	CREMAINS PER GRAVE							
						<b>.</b>				1			
Installation Fee Payable to:						Spring delivery begins (date):							
	OWNSHIP 810-385-16	616				WEATHER PERMITTING April 16							
3350 VINCENT ROAD						Fall/Winter Delivery "cutoff" (date):							

WEATHER PERMITTING Nov 15

#### **RURAL HILL**

Address	215 W. MAIN ST.					Form Required: FORM	Yes	Χ	No	
City	NORTHVILLE	State	MI	Zip	48167	Grave Location Required on Memorial: `	Yes		No	Х
Phone	(248) 349-1300					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 449-9953					If yes, what symbol?				
Email	mdomine@ci.northville.m	<u>ii.</u> and	sodonohu	ue@ci.northville	e.mi.us	Benches Permitted: Certain locations	Yes	Х	No	
Contact	MIKE DOMINE - DIRECT	OR				Borders Required on Foundation:	Yes	Х	No	
	SARAH ODONOHUE	248-449-9	9930							
			Rι	ıles & Regulat	ions - Ins	stallation Fee				
FLUSH, B	EVELS, SLANTS AND MO	ONUMENT:	S. 42" MAX	K FOR SINGLE	GRAVE.	SEE SHEET FOR SETTING				
FEES WIT	THOUT A FOUNDATION.									
FOUNDA <sup>*</sup>	TION FEE:		SETTING	FLUSH MARK	KERS/NO	FOUNDATION:				
16"x 8" - \$	5120.00		24"x 12" -	- \$110.00						
20"x 10", 2	24"x 10", 24"x 12" - \$170.0	00	36"x 12" -	· \$120.00						
30"x 10" o	or 12" - \$200.00		48"x 12" -	- \$130.00	_					-
32"x 12" -	\$200.00		Al-t-	C	*	*CONTACTS:				
36"x 10" o	or 12" - \$200.00			Cemetery	C	CEMETERY LINE - 248-305-2702 (Voicemail)				
42"x 10" o	or 12" - \$250.00			ot allow 1	F	PIRMARY CONTACT: SARA ODONOHUE 248-449	9 <b>-</b> 9330	)		
32"x 12" o	or 14", 38"x 12" or 14" - \$20	00.00		t monumen	=	odonohue@ci.northville.mi.us				
46"x 12" o	or 14", 48"x 12" or 14" - \$25	50.00	-	flush marke		MIKE DOMINE - DIRECTOR				
52"x 12" o	or 14" - \$270.00		on a si	ingle grave!						
FOR LAR	GER SIZE FOUNDATION	S USE .48	PSI - GOV	ERNMENT MA	RKERS -	\$170.00				
Notes: # (	OF FULL BURIALS PER GRA	AVE: 5 # O	F CREMAIN	S PER GRAVE:	4 OR 1 FL	JLL AND 4 CREMATIONS PER GRAVE				

Installation Fee Payable to: CHECKS ONLY

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 - ROSEVILLE

							ľ						
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	Х			
Contact	SANDY BANOVETZ	Phone	586-777-9 EXT. 4	116		Borders Required on Foundation:	Yes		No	Х			
			Ru	les & Regulat	ions - Installatior	ı Fee							
FLUSH MARKERS ONLY IN SECTIONS J, K, L AND M. MAXIMUM SIZE FOR COMPANION MARKERS IS 36" LONG.													
MONUME	NTS ALLOWED ON 12 (	GRAVE LOT	S. NEED P	RIOR APPRO	VAL FOR UPRIG	HTS.							
FOUNDA <sup>*</sup>	TION FEES:												
24"x 12" -	\$350.00												
36"x 12" -	\$425.00												
Notos: #	OF FULL BURIALS PER	CDA\/E: 1	# OE OBEI	MAINS DED C	:DA\/E- 2								
Notes. #	OF FULL BURIALS PER	GRAVE. I	# OF CREI	VIAINS PER G	IKAVE. Z								
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begins: Apr. 1st							
	HEART CEMETERY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				WEATHER PERMITTING							
	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff": Oct. 15	th						

WEATHER PERMITTING

## SACRED HEART OF SAINT MARY - DETROIT

Address	17219 MOUND RD.					Form Required:	Yes		No	Х
City	DETROIT	State	MI	Zip	48212	Grave Location Required on Memorial:	Yes		No	Х
Phone	(313) 831-6659 (updated 12	2-2020)				Symbol Required on Memorial:	Yes		No	Х
Fax	(313) 831-8522					If yes, what symbol?			_	
Email	N/A					Benches Permitted: Call first	Yes	Х	No	
Contact	DUANE	Phone	(313) 831	-6659		Borders Required on Foundation:	Yes		No	Χ
										1
			Ru	iles & Regulat	ions - Installation	Fee				
FLUSH G	RANITE AND SLANTS. M	ONUMEN	TS ALLOW	ED IN DESIGN	IATED AREAS.					
FOUNDA	TION FEE:									
24"x 12"x	4" - 200.00									
24"x 10"x	16" - \$300.00 (SINGLE SL	.ANT)								
24"x 10"x	16" - \$400.00 (SLANT ON	A BASE)								
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # OI	F CREMAIN:	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
SACRED	HEART OF SAINT MARY					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	-3623			'		•	
			Ru	iles & Regulat	ions - Installation	Fee				
24"x 12"x	4" - ONLY 36" GRAVES									
INCH TO	SUPPLY FOUNDATIONS									
ONLY OF	PEN 9 AM - 1 PM									
Notes:										
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

HIGHLAND, MI 48357

										-	
Address	ANGEL RD. OFF 6 MILE					Form Required:		Yes		No	Х
City	PLYMOUTH	State	MI	Zip	48170	Grave Location Required or	n Memorial:	Yes		No	Х
Phone	(248) 887-6700					Symbol Required on Memo	rial:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?				-	
Email						Benches Permitted:		Yes	Х	No	
Contact	MIKE WILLENBERG @		(248) 88	37-6700		Borders Required on Found	lation:	Yes		No	Χ
НСМ	HURON CEMETERY MA	INTENANO	CE			2" border o	ı all sides				
			F	Rules & R	Regulations - Insta	allation Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUME	NTS.				Grave ations			
GOVERN	MENT ISSUED MARKERS	10	NE								
FLUSH S	ETTING OF GRANITE & B	RONZE O	N GRANI	TE (NO F	OUNDATION)		248-43	37-039 <sub></sub>	4		
FOUNDA <sup>*</sup>	TION FEE FOR MONUME	NTS & BR	ONZE ON	ONCR	RETE (NON VA)		INCH V		RIALS	]	
							FOUND				
ALL FOUI	NDATIONS MUST BE 2" L	ARGER O	N ALL SI	DES THA	N MONUMENT BA	ASE.	IVI	IIKE W.	•		
ADD 4" T	O LENGTH AND WIDTH C	OF BASE T	O DETER	RMINE FO	DUNDATION 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 \$5	0.00 FOF	R ALL FEES FOR I	BUILT IN VASE)					
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CR	EMATION	N BURIALS PER G	RAVE: 2-4					
(C	ALL MIKE @ HURON CEN	METERY M	IAINTENA	ANCE FIR	RST)						
Installatio	on Fee Payable to:	CASH, CI	HECK			Spring delivery begins (d	ate):				
HURON (	EMETERY MAINTENANC	CE <u>CC V</u>	IA PHON	<u>E</u>		WEATHER PERMITTING					
P.O. BOX	112					Fall/Winter Delivery "cuto	ff" (date):				

WEATHER PERMITTING

## SALINE TOWNSHIP CEMETERIES

									1		
Address						Form Required:	Yes		No	Χ	
City	SALINE	State	MI	Zip	48176	Grave Location Required on Memorial:	Yes		No	Χ	
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	Х	No		
Contact	BRAD BOUCHIE	Phone	(734) 274-	-7422		Borders Required on Foundation:	Yes		No	Х	
										1	
			Ru	les & Regulati	ions - Installatior	Fee					
BRONZE	, FLUSH GRANITE, SLANT	ΓS, BEVEL	S, AND MC	NUMENTS							
FOUNDA	TION FEE:										
.65 PSI, N	//INIMUM \$200.00										
ALL BASI	L BASES FOR MONUMENTS MUST BE NO LONGER THAN 34" ON A SINGLE GRAVE										
**ALL MA	RKERS ARE SUBJECT TO	THE APF	PROVAL OF	R DENIAL OF T	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					
				<u>-</u>							
Installation	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	I. MI 49236					OCTORED 1ST					

## SEYMOUR LAKE

									1	
Address	SASHABAW & SEYMOU	R LAKE RI	O.			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				
			Rul	les & Regulat	ions - Installatior	Fee				
FLUSH, S	SLANTS, BEVELS, AND M	1ONUMEN	ΓS.							
FOUNDA	TION FEE:									
.60 PSI, \$	150.00 MINIMUM - Price in	ncludes the	foundation	and installatio	n <b>(as of 1-1-25)</b>					
Price is ca	alculated by the size of the	base meau	rement of th	ne monument.						
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAINS	PER GRAVE:	2 OR 1 FULL AND	CREMATION PER GRAVE				
										l l
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) 39	4-5292	Borders Required on Foundation:	Yes		No	
			R	ules & Regulations - Installation	on Fee				
INCH ME	MORIALS TO DO FOUND	ATION							
Notes:									
Installation	on Fee Payable to:		Spring delivery begins (date):						
INCH ME	MORIALS								
580 S. M	AIN ST.				Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167								

#### **SMITH**

HIGHLAND, MI 48357

									-	
Address	FENTON ROAD NEAR F	READ ROA	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	Χ
Fax	(248) 887-4487				If yes, what symbol? _				1	
Email					Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG @		e (248) 887-	-6700	Borders Required on Fo	oundation:	Yes	Χ	No	
НСМ	HURON CEMETERY MA	AINTENANO	CE		2" borde	er on all sides				
	Rules & Regulations - Installation Fee									
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUMENT	S - 36" MAX PER GRAVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TYI	PES\$25	0.00						
FLUSH SI	ETTING OF GRANITE & E	BRONZE O	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BR	ONZE ON C	CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MINIT	MUM \$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 (	OF BASE T	O DETERM	IINE FOUNDATION 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 FEES FOR BUILT	IN VASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CREM	MATION BURIALS PER GRAVE	: 2-3					
(C	ALL MIKE @ HURON CE	METERY M	IAINTENAN	ICE FIRST)						
Installatio	on Fee Payable to:	CASH, CI	HECK_		Spring delivery begins	s (date):				
HURON C	EMETERY MAINTENANG	CE <u>CC V</u>	IA PHONE		WEATHER PERMITTIN	IG				
P.O. BOX	112				Fall/Winter Delivery "c	utoff" (date):				

WEATHER PERMITTING

# <u>SOOP</u>

Address	49250 DENTON ROAD					Form Required:	Yes		No	Х
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	Χ
Fax	(734) 699-5213					If yes, what symbol?			•	
Email	bbeaudry@vanburen-mi.o	org				Benches Permitted:	Yes		No	Х
Contact	BRITTANY BEAUDRY	Phone	(734) 699-8	3909		Borders Required on Foundation:	Yes	Χ	No	
						*Note: Benches must not exceed :	size of	grave		
			Rule	es & Regulati	ions - Installation	Fee				
CHARTER	R TOWNSHIP OF VAN BU	REN, KIRK	, CHUCK O	R SAM, TO S	TAKE GRAVE. TI	HE FAMILY IS RESPONSIBLE FOR FO	JNDAT	TONS.		
BENCHES	S MUST NOT EXCEED SIZ	ZE OF GRA	VE. NO SU	JNDAY OR H	OLIDAY BURIALS					
INCH TO	INSTALL FOUNDATIONS:	\$1.00 PSI								
FOUNDA <sup>-</sup>	ΓΙΟΝ FEE: \$50.00 (MARK	ING AND I	NSPECTION	۷)						
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAINS	PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE				
Installatio	n Fee Payable to: Check	s Only				Spring delivery begins (date):	_	_	_	
CHARTER	R TOWNSHIP OF VAN BU	REN				APRIL 1ST				
46425 TY	LER ROAD					Fall/Winter Delivery "cutoff" (date):				
BELLEVIL	LE, MI 48111					NOVEMBER 30TH				

# SOUTH LYON

SOUTH LYON, MI 48178

									-	
Address	WEST LAKE RD. OFF 10	) MILE				Form Required: FORM	Yes	Х	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) 437	7-1735		Borders Required on Foundation:	Yes	Х	No	
	INCH MEMORIALS TO	VERIFY SID	ES			2" or 3" border required				
			Ru	ules & Regulati	ions - Installation	Fee				
FLUSH, B	BEVELS, SLANTS AND MO	ONUMENT	S. ALL ST	ONES MUST B	E PLACED AT HE	AD OF GRAVE				
FACING V	WEST SO NAMES CAN B	E READ FF	ROM FROM	NT OF CEMETE	RY. SECTION 8	HAS FOOTSTONE				
AND HEA	DSTONE GRAVES.									
24"x 12"x	4" MUST BE ROCK SIDE	ES								
ONLY 1 A	BOVE GROUND MARKE	R PER GRA	AVE. SEC	OND MARKER	WILL BE SET FL	JSH. MONUMENT				
FOUNDA <sup>-</sup>	TION PERMIT REQUIRED	Э.								
FOUNDA <sup>*</sup>	TION FEE: BASED ON S	IZE (2" ARC	DUND MAF	RKER) UP TO 2	26"x 16" - \$85.00.					
GOVERN	MENT MARKERS - \$95.00	0								
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 CRE	MAINS PER G	RAVE: 4					
Installatio	on Fee Payable to:	CASH, Ch	HECK ONL	<u>-Y</u>		Spring delivery begins (date):				
CITY OF	SOUTH LYON					WEATHER PERMITTING				
335 S W	S WARREN Fall/Winter Delivery "cutoff" (date):									

WEATHER PERMITTING

## SOUTHFIELD

A -l -l	00000 EVEDODEEN					Farm Daningd	V	],,_ [	V
	26000 EVERGREEN	_				Form Required:	Yes	No	X
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?		, ,	
Email	N/A					Benches Permitted:	Yes	No	Χ
	SHAVELLA WILLIAMS JOHN THOMPSON (PARI	<b>Phone</b> K SVCS DE	(248) 796- EPT.) or (24			Borders Required on Foundation:	Yes	No	Χ
			Ru	les & Regulati	ions - Installation	Fee			
FOUNDA <sup>-</sup>	TIONS WILL NOT BE POU	RED WITH	HOUT SPE	CIFIC INSTRU	CTIONS FROM F	AMILY.			
FOUNDA <sup>*</sup>	TION FEE: (SUBJECT TO	CHANGE	)						
24"x 12" -									
UP TO 30	" - \$150.00								
	" - \$175.00								
	" - \$200.00								
	·								
Nata - #	05 5111 DUDIAL 0 DED 0		" OF ODE!	MAINO DED O	DAYE 4				
Notes: #	OF FULL BURIALS PER G	RAVE: 1	# OF CREI	VIAINS PER G	KAVE: 4				
Installatio	on Fee Payable to:	Cash & Ch	<u>iecks</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

									_	
Address	PO BOX 605 (JOSL	YN RD., 1/4 MIL	E NORTH OF	CLARKSTON F	RD)	Form Required:	Yes	N	o [	Χ
City	OXFORD	State	MI	Zip	48371	Grave Location Required on Memorial:	Yes	N <sub>1</sub>	0	Х
Phone	(248) 396-5266					Symbol Required on Memorial:	Yes	N	o	Χ
Fax	N/A					If yes, what symbol?			r	
Email	squarelakecemetery	/@gmail.com				Benches Permitted:	Yes	N <sub>1</sub>	0	Χ
Contact	DENISE SCHICK -	TREASURER	Phone	(248) 459-384	40	Borders Required on Foundation:	Yes	N	0	Χ
	SEXTON BRAD SCH	HICK		(810) 691-708	36					
			Ru	les & Regulat	ions - Installa	tion Fee				
BRONZE	, FLUSH, BEVELS, S	LANTS AND M	ONUMENTS	S.						
FOUNDA	TION FEE: .50 PSI									
CALL DE	NISE FIRST FOR MO	ONUMENT RE	GULATIONS	/RESTRICTIO	NS TALLER T	HAN 38".				
ALL DES	GNS MUST HAVE P	RIOR APPROV	/AL.							
FOUNDA	TIONS ARE POURE	O (WEATHER I	PERMITTING	G) APRIL THR	U OCTOBER.	DELIVERY OF MEMORIAL				
ONLY IF	FOUNDATION IS IN	PLACE.								
MUST CA	ALL DENISE BEFORE	DELIVERY.								
Notes: #	OF FULL BURIALS PE	R GRAVE: 1 #	OF CREMAIN	IS PER GRAVE:	2 OR 1 FULL A	ND 1 CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
SQUARE	LAKE CEMETERY A	SSOCIATION				YEAR ROUND - WEATHER PERMITT	ING			
742 BOS	CO DR.					Fall/Winter Delivery "cutoff" (date):				
LAKE OR	ION, MI 48362					YEAR ROUND - WEATHER PERMITT	ING			

## ST. CLEMENT

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@gma	Phone il.com	(586) 757 EXT. 302	-3306		Borders Required on Foundation:	Yes		No	Х
			Ru	iles & Regulat	ions - Installation	Fee				
FLUSH G	RANITE ONLY WITH PEN	CIL ROUN	ID EDGES,	4" THICK.						
MAXIMUI	M SIZE OF SINGLE MARK	ER IS 24">	12". MAX	IMUM SIZE OF	DOUBLE MARKE	ER IS 36"x 12".				
BRONZE	MARKERS (INCLUDING	VA) ARE F	REQUIRED	TO BE MOUN	TED ON GRANIT	E OR CEMENT.				
BENCHE	S, UPRIGHT MONUMENT	S AND UP	RIGHT SLA	ANTS NO LON	GER PERMITTED					
FOUNDA	TION FEE:									
GRANI	<u>TE</u>			<b>BRONZE</b>						
	2" - \$325.00			24"x 12" - \$60						
36"x 12	2" - \$500.00 (TWO SETTIN	GS)		36"x 12" - \$80	00.00					
INFANT A	AND STONE SETTINGS - I	PLEASE C	ALL							
CALL TE	RESA RORICK FOR GRAV	/E #, ETC.	, OR EMAII	_ stclementcem	netery@gmail.com					
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN	S PER GRAVE:	2 OR 1 FULL AND 1	CREMATION PER GRAVE				
_										
Installation	on Fee Payable to:					Spring delivery begins (date):				
ST. CLEN	MENT CEMETERY					APRIL 1ST				
8075 RIT	TER					Fall/Winter Delivery "cutoff" (date):				
CENTER	LINE, MI 48015					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	Х
City	BRIGHTON	State	MI	Zip	Grave Location Re	equired on Memorial:	Yes		No	Х
Phone	(248) 887-6700				Symbol Required	on Memorial:	Yes		No	Х
Fax	(248) 887-4487				If yes, what symi	ool?			_	
Email					Benches Permitte	d: <b>Call contact</b>	Yes		No	
Contact	MIKE WILLENBERG @	Phone	(248) 887-	6700	Borders Required	on Foundation:	Yes	Х	No	
HCM	HURON CEMETERY MAI	NTENANC	E		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 Of	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA <sup>-</sup>	TION FEE FOR MONUME!	NTS & BRO	ONZE ON C	ONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MINIM	IUM \$250.(	00							
ALL FOU	NDATIONS MUST BE 2" LA	ARGER OF	N ALL SIDE	S THAN MONUMENT E	BASE.					
ADD 4" T0	O LENGTH AND WIDTH O	F BASE TO	O DETERM	INE 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 \$50.0	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 CEM	<u>IETERY M</u>	<u>AINTENA</u> N	CE FIRST)						
Installatio	on Fee Payable to:	CASH.	CHECK		Spring delivery b	egins (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 Mer	norial: `	Yes	Χ	No	
Phone	(313) 562-1900					Symbol Required on Memorial:	,	Yes	Χ	No	
Fax	(313) 562-8238					If yes, what symbol? Cro	oss	_			
Email	shc@sthedwigcemetery.co	<u>om</u>				Benches Permitted:	,	Yes		No	Х
Contact	Brian D. Jonca	Phone	(313) 562-1	1900		Borders Required on Foundation	: `	Yes		No	Х

#### **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: - Effective 2-1-2025

ALL FLAT MARKERS - \$425.00

GOVERNMENT MARKER 24"x 12" - \$300.00. **RE-SET FEE - \$300.00** 

\*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):

NOV. 1st (BUT FLEXIBLE - WEATHER PERMITTING)

## 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 - Install	ation 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 MAR	RKERS. ALL MARKERS MU	JST FACE DRIVEWAY.			
Notes: #	OF FILL BUIDING DED CD	∧\/E·1 ∩P	1 I IDN 2 DI	EOPLE OR MAX 1 PERSON F	PED VOLT (CALL EIDST)			
Hotes. #	OF TOLL BORNALOT ER GRA	AVE. I OK	T OIXIV, Z I I	LOI LE OR WAX IT EROONT	EN VOLT (CALLTINOT)			
Installatio	on Fee Payable to:				Spring delivery begins (date):			
	•	: (586) 784	-5701		WEATHER PERMITTING			
	MILE RD.	(322)	- · · · ·		Fall/Winter Delivery "cutoff" (date):			
	, MI 48005				WEATHER PERMITTING			

## ST. JOHNS MEMORIAL GARDENS - FRASER

									1	
Address	15685 FOURTEEN MILE	RD				Form Required:	Yes		No	Х
City	FRASER	State	MI	Zip	48026	Grave Location Required on Memorial:	Yes		No	Х
Phone	(810) 329-5937					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 329-6540					If yes, what symbol?			1	
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	Х
			Rı	ıles & Regulat	ions - Installation	ı Fee				
GRANITE	AND BRONZE ALLOWE	D. GARDE	N OF MEM	10RY - ALL FL	USH. BRONZE A	RE 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	30						
IF CEME	TERY POURS CONCRETE	E BASE - F	EE IS .75 F	PSI						
Notes: #	OF FULL BURIALS PER G	GRAVE: 2 (	DEPENDIN	IG ON SECTIO	ON). # OF CREMA	INS PER GRAVE: UP TO				
3 DI	EPENDING ON SECTION.	OR 1 FUI	L AND 2 C	REMAINS PE	R GRAVE (CALL I	FOR APPROVAL FIRST).				
Installation	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,	MI 48064					OCTOBER 30TH				

## ST. JOHN - HOWELL / HARTLAND

Address	1991 N. HACKER RD.					Form Required:	Yes	No
City	HOWELL	State	MI	Zip	48855	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		Phone	(517) 546-	7200		Borders Required on Foundation:	Yes	No
						2" border on all sides		
			Rul	les & Regulati	ions - Installation	Fee		
.35 PSI +	2" ON ALL SIDES							
Notes:								
Installatio	on Fee Payable to:					Spring delivery begins (date):		1
	I THE BAPTIST CATHOLIC					opining delivery begins (date).		
	ACKER RD.	O OHUNCE	ı			Fall/Winter Delivery "cutoff" (date):		
						rainwinter benvery cuton (date):		
IHOWELL,	MI 48855							

## <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?			
Email						Benches Permitted:	Yes	No	
Contact	LARRY SANBORN	Phone	(734) 368	3-7949		Borders Required on Foundation:	Yes	No	Х
00111401			(101)000	7.0.0		Doracio regamea en reamación	. 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

									-	
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	Χ
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	2-7010		Borders Required on Foundation:	Yes		No	Х
			Rı	ules & Regulati	ions - Installation	Fee				
FOUNDA	TION FEES:									
UP TO 32	" - \$450 + TAX									
UP TO 48	" - \$625 + TAX									
UP TO 52	" - \$725 + TAX									
UP TO 60	" - \$840 + TAX									
OVER 60	' - CALL FOR QUOTE									
FLUSH S	INGLE OR COMPANION -	\$275								
Notes:										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ST. JOSE	PH CATHOLIC CEMETER	Υ				WEATHER PERMITTING				
2520 W. V	VILLOW 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	Χ
Fax						If yes, what symbol?			
Email						Benches Permitted:	Yes	No	
Contact	KEVIN	Phone	(734) 735-	1276		Borders Required on Foundation:	Yes	No	
			Rul	es & Regulati	ons - Installation	Fee			
CALL FOI	R PRICING								
ı									
Notes:									
					<del></del>				-
Installatio	on Fee Payable to:					Spring delivery begins (date):			
						Fall/Winter Delivery "cutoff" (date):			

## ST. JOSEPH - MONROE

Address	909 N. MONROE ST.					Form Required:	Yes	No	Х
City	MONROE	State	MI	Zip	48162	Grave Location Required on Memorial:	Yes	No	Х
Phone	(734) 241-1411					Symbol Required on Memorial:	Yes	No	Χ
Fax						If yes, what symbol?	_ <u></u>		
Email	standifer.julie@aod.org					Benches Permitted: must have cemetery approval	Yes	X No	
	JULIE STANDIFER 20 - pizzo.heidi@aod.org	Phone Christine	` ,	41-1411 itz.christine@	@aod.org	•••	Yes	No	Х
				Rules & Re	gulations - Ir	stallation Fee			
FOUNDA	TION FEE:								
16"x 10"x	4" OR 18"x 10"x 4" - \$300.	.00 INFAN	Т						
FLUSH 2	4"x 12"x 4" - \$475.00								
FLUSH 4	8"x 12"x 4" - \$630.00								
MONUME	ENTS - <b>WITH PRIOR APP</b> F	ROVAL AN	ID ADDIT	IONAL LO	T 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 (	GRAVE: 1	# OF CF	REMAINS P	ER GRAVE:	5			
Installatio	on Fee Payable to: <u>ST. JC</u>	SEPH CE	METERY	<u>′</u>		Spring delivery begins (date):			
MAIL TO:	ST. JOSEPH CEMETERY	Y				APRIL 1ST			
	909 N. MONROE ST.					Fall/Winter Delivery "cutoff" (date):			
	MONROE, MI 48162					OCTOBER 31st			

# ST. LAWRENCE

Address	5981 AUBURN RD.					Form Required:	Yes	No	Х
City	SHELBY TWP	State	MI	Zip	48317	Grave Location Required on Memorial:	Yes	No	Х
Phone	(586) 731-5347					Symbol Required on Memorial:	Yes	No	Х
Fax	(586) 731-3088					If yes, what symbol? Needs approval			
Email	SRANGER@STLAWRE	NCEPARIS	H.COM			Benches Permitted:	Yes	No	Х
Contact	STEVE RANGER	Phone	(586) 73 ext. 257	31-5347 7		Borders Required on Foundation:	Yes	No	Χ
			F	Rules & Re	gulations - Installatio	n Fee			
GRANITE	, BRONZE, BEVELS, SLA	ANTS AND	MONUME	ENTS.					
FOUNDA	TION FEE:								
ALL FLAT	MARKERS - \$300.00								
ALL UPRI	GHT MARKERS - \$350.0	0							
NO NEW	UPRIGHT MONUMENTS	OVER 36"	TALL AL	LOWED (e	ffective 1-1-2018				
Notes: # 0	OF FULL BURIALS PER GR	AVE: 1 # OF	F CREMAII	NS PER GR	AVE: 2 OR 1 FULL AND	1 CREMATION PER GRAVE			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
ST. LAWF	RENCE CEMETERY					APRIL 15TH			
44633 UT	ICA ROAD					Fall/Winter Delivery "cutoff" (date):			
UTICA. M	l 48317					OCTOBER 1ST			

#### ST. MARYS - MILFORD

HURON CEMETERY MAINTENANCE CC VIA PHONE

P.O. BOX 112

HIGHLAND, MI 48357

									1	
Address	SUMMIT STREET				Form Required:		Yes		No	Х
City	MILFORD	State	MI	Zip	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	<b>248)</b> 887-	6700	Borders Required on F	oundation:	Yes	Х	No	
HCM	HURON CEMETERY MA	INTENANC	CE		2" boro	der on all sides		,	_	
			Ru	les & 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	S - ALL TYF	PES\$25	0.00						
FLUSH SE	ETTING OF GRANITE & B	RONZE OI	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON C	CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.0	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 T	O DETERM	IINE FOUNDATION SIZ	ZE NEEDED.					
ADD \$50.0	00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
	MARKERS (SET OF 4)	\$125.00								
	``		(ADD \$50.	00 FOR ALL FEES FO	R BUILT IN VASE)					
	OF FULL BURIALS PER (									
					. 0.0.0.2.					
(0.	ALL MIKE @ HURON CEN	VIETERT IVI	IAIN I ENAN	OE FIRST)						
					F					
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

Address	24 MILE & BASE ST.					Form Required: FORM	Yes	X	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			1	
Email	CEMETERY@SMQOC.COM	GBEAUVAIS	@SMQOC.0	COM		Benches Permitted:	Yes		No	Х
	GLORIA BEAUVAIS OR		(586) 72			Borders Required on Foundation:	Yes	Χ	No	
KERRY at M	ION. SVCS - MS.UNLIMITED@	YAHOO.COM	l (586) 453-3	3853 EXT 22 HC	OME (586) 727-9062	2" border required				
			F	Rules & Regu	ılations - Installatio	n Fee				
CALL CE	METERY TO VERIFY WH	HAT THE F	AMILY CA	N HAVE						
FOUNDA	TION FEE:									
ALL FOU	NDATIONS - \$0.65/SQ. II	NCH CALC	JLATED (	ON BASE SIZ	E (3-1-24)					
VA MARB	LE UPRIGHT INSTALL F	EE: \$190								
VA BRON	ZE HEADSTONE MOUN	ITING: \$125	5							
CONTAC <sup>*</sup>	T KERRY SHUTTLEWOF	RTH FOR C	URRENT	PRICES - Ho	me (586) 727-9062	Cell (586) 453-3853				
					(000) 121 0002	Co.: (Coo) 100 000				
Notes: #	OF FULL BURIALS PER GI	RΔ\/E·1 # C	E CREMA	INS PER GRAV	/E: 3 OR 1 FULL AND	2 CREMAINS PER GRAVE				
itotes. π	OF TOLL BORNALOT LICO	IXAVE. I # C	OKLINA	INOT ER ORA	VE. 3 OK 11 OLL AND	2 OKLIVIAINO I EK OKAVE				
 Installatio	on Fee Payable to and N	lail to:				Spring delivery begins (date):				
	ENT SERVICES UNLIMIT		- CHECK	•		WEATHER PERMITTING				
	MILE RD.		., GIILOI	•		Fall/Winter Delivery "cutoff" (date):				
LENOX, N	/II 40030					NOVEMBER 15TH				

## ST. MARY'S - PINCKNEY

Address	832 PUTNAM ST.					Form Required:	Yes	Х	No	
City	PINCKNEY	State	MI	Zip	48169	Grave Location Required on Memorial:	Yes		No	Х
Phone	(734) 878-2940					Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol? Cross			_	
Email						Benches Permitted:	Yes	Х	No	
Contact	GARY NICHOLAS (SEXTON	Phone	(734) 878	3-2940		Borders Required on Foundation:	Yes	Х	No	
						2" border required on all side	S			
			Rul	les & Regulation	ons - Installation	Fees				
FOUNDA <sup>-</sup>	TION FEE:									
FOUNDA <sup>-</sup>	TIONS ARE .50 PSI PLUS 2	2" ON EAC	CH SIDE, \$	200.00 MINIMU	JM					
Notes:										
Notes.										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
GARY NIC										
832 PUTN						Fall/Winter Delivery "cutoff" (date):				
	Y, MI 48169					, ,				

# ST. MARY'S - ST. CLAIR

A -l -l	445 N. OLVILL OTDEET	CT MAD	V OATUOI	IO OLILIDOLI)		Farma Damidaadi	\/		l.,_	
	415 N. SIXTH STREET	,		.IC CHURCH)		Form Required:	Yes		No	
City	ST. CLAIR	State	MI	Zip	48079	Grave Location Required on Memori	al: Yes		No	X
Phone Fax	(810) 329-2255					Symbol Required on Memorial:	Yes	Х	No	
Email	abissett@stmarystclair.org	7				If yes, what symbol? <b>Christian</b>			1	
						Benches Permitted:	Yes		No	Х
Contact	Anna Bissett Parish Secretary	Phone	(810) 329	-2255		Borders Required on Foundation:	Yes		No	Χ
			Rul	es & Regulation	ons - Installation	Fees				
ALL MAR	KERS AND MONUMENTS	MUST BE	GRANITE,	MARBLE OR	BRONZE. ONLY	ONE UPRIGHT MONUMENT PER GF	RAVE ALL	OWED	).	
ALL MON	UMENTS MUST BE SUBM	IITTED FO	R APPROV	/AL. SEE ATT	ACHED DOUMEN	IT FOR ALL REGULATIONS.				
FOUNDA	TION FEES:									
MONUME	NT SIZE									
20 INCHE	S OR LESS		\$400.00		SINGLE (	GRAVE: UP TO 26" H X 34" W X 14" [	DEEP			
21 TO 32	INCHES		\$500.00		DOUBLE	GRAVE: UP TO 36" H X 60" W X 14"	DEEP			
33 TO 44	INCHES		\$600.00		TRIPLE G	RAVE: UP TO 36" H X 72" W X 14" [	DEEP			
45 TO 56	INCHES		\$700.00							
OVER 56	INCHES		Quoted in	7-10 days						
REMOVA	L OF EXISTING FOUNDAT	TIONS	Quoted in	7-10 days						
Notes:										
					<del></del>	Г				1
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ST. MAR	CATHOLIC CHURCH					NO DELIVERIES UNTIL FOUNDATI	ONS ARI	E POUF	RED	
415 N. SI	XTH ST.					Fall/Winter Delivery "cutoff" (date)	)=			
ST. CLAIF	R, MI 48079									

## <u>ST. MARYS - WAYNE</u>

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	Χ
Contact	MS. GRIFFIN	Phone				Borders Required on Foundation:	Yes	Х	No	
						2" border required				
			Ru	les & Regula	tions - Installatio	n Fee				
FOUNDA	TION FEE:									
	- MINIMUM \$200.00									
INCH ME	MORIALS TO DO FOUND	ATION								
N	OF FULL DUR:		0= 0===	10 DED 05 (**						
Notes: #	OF FULL BURIALS PER GR	AVE: 1 #	OF CREMAIN	NS PER GRAV	E: 6					
In at 11 of	on For Broad L. (									
	on Fee Payable to:					Spring delivery begins (date):				
INCH ME						WEATHER PERMITTING				
580 SOU						Fall/Winter Delivery "cutoff" (date):				
NORTHV	ILLE, MI 48167					WEATHER PERMITTING				

#### ST. MICHAEL - RICHMOND

Address	1/4 MILE N. OF GRATIO	Γ AVE. ON	M19			Form Required: FORM	Yes	Χ	No	
City	RICHMOND	State	MI	Zip	48062	Grave Location Required on Mer	morial: Yes		No	Х
Phone	(586) 727-5215					Symbol Required on Memorial:	Yes	Х	No	
Fax	(586) 727-3760					If yes, what symbol? Christian	symbol		_	
Email	RFILLHAR@HOTMAIL.C	<u>OM</u>				Benches Permitted:	Yes		No	Х
	BOB FILLHART MON. SVCS - MS.UNLIMITED@Y	Phone 'AHOO.COM		<b>727-5215</b> -3853 EXT 22	HOME (586) 727-9062	Borders Required on Foundation	: Yes		No	Х
				Rules & Re	egulations - Installatio	n Fee				
FLUSH, E	BEVELS, SLANTS, AND MO	ONUMENT	S.							
FOUNDA	TION FEE:									
ALL FOU	NDATIONS - \$0.65/SQ. IN	CH CALCU	JLATED	ON BASE	SIZE (3-1-24)					
VA MARE	BLE UPRIGHT INSTALL FE	E: \$190								
VA BRON	IZE HEADSTONE MOUNT	ING: \$125								
CEMETE	RY RUN BY:				Cina	la Faundation Mayimum, 20 inche	a wida			
	ST. AUGUSTINE PARISH	1			•	le Foundation Maximum: 30 inche ble Foundation Maximum: 60 inch				
	6035 S. MAIN ST.					tht Maximum: 36 Inches from grou				
	RICHMOND, MI 48062				Max	imum Depth 16 inches				
CONTAC	T KERRY SHUTTLEWOR	TH EOD O	IDDEN	T DDICES	Homo (596) 727 0062	Call (596) 452 3953				
CONTAC	T RENT SHOTTLEWOR	ITI FOR C	JKKEN	I FRICES -	Home (300) 727-9002	Cell (300) 433-3633				
Notes: #	OF FULL BURIALS PER GRA	.VF·1 #Ω	F CREMA	AINS PER GI	RAVE: 2 OR 1 FULL AND	1 CREMATION PER GRAVE				
1101001 11	or roll born, led rent ord		OT CELLINI		TOTAL PORT OF THE	T ONLINE THE OIL THE				
Installatio	on Fee Payable to and Ma	nil to:				Spring delivery begins (date):				
MONUME	ENT SERVICES UNLIMITE	D CASH	I, CHEC	K		WEATHER PERMITTING				
37640 30	MILE RD.					Fall/Winter Delivery "cutoff" (d	ate):			
LENOX, N	И 48050					WEATHER PERMITTING				

# ST. NICHOLAS

									-	
Address	ON GROVELAND AV	E., 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	Х
Fax	(810) 744-4880					If yes, what symbol?			7	
Email	cfirman@covenanto	emetery.com				Benches Permitted: Prior approval	Yes	Х	No	
Contact	CATHY FIRMAN	Phone	(810) 7	767-2621		Borders Required on Foundation:	Yes	Х	No	
	RECORDS DEPT @	© CHURCH				2" border required				
				Rules & I	Regulations - Installation	Fee				
FLUSH, S	SLANTS, BEVELS, A	ND MONUMEN	ΓS.							
FOUNDA	TION FEE:									
.65 PSI, \$	129.60 MINIMUM									
ADD 2" B	ORDER ALL THE W	AY AROUND TO	FIGUR	E FEE.						
Notes: #	OF FULL BURIALS PE	R GRAVE: 1 # O	F CREM	AINS PER	GRAVE: 2 OR 1 FULL AND 1	CREMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
	CEMETERY SERVIC	CES				WEATHER PERMITTING				
	ST HILL RD.	- <del>-</del>				Fall/Winter Delivery "cutoff" (date):				
	BLANC, MI 48439					WEATHER PERMITTING				

## ST. PATRICK (OLD) CATHOLIC

									1	
Address	5671 WHITMORE LAK	(E ROAD				Form Required:	Yes		No	Χ
City	ANN ARBOR	State	MI	Zip	48105	Grave Location Required on Memorial:	Yes		No	Χ
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	Χ
Contact	JOHN MARKEY		Phone	(248) 231-411	13	Borders Required on Foundation:	Yes	Х	No	
	DEBBIE WELCH (SEC	RETARY)	Phone	(734) 662-814	11	2" border required on all side	s		•	
			Ru	les & Regulati	ions - Installatior	ı Fee				
FOUNDA	TION FEE:									
	 PLUS 2" BORDER ON E	EACH SIDE								
Notoc: "	OF FULL BURNALO BED (		COEMAIN		0.00.4.5.11.1.4.10.1	4 ODEMATION DED ODANIE				
Notes: #	OF FULL BURIALS PER G	JRAVE: 1 # OF	- CREMAIN	S PER GRAVE: 2	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
In et clied	on Foe Daughte to					Coming delivery begins (deta):				
	on Fee Payable to:	1050 110				Spring delivery begins (date):				
	AIGH OUTDOOR SERVI	ICES, LLC				MAY 15TH				
23113 CL	JRRIE RD.					Fall/Winter Delivery "cutoff" (date):				
SOUTH L	YON. MI 48178					OCTOBER 15TH				

## ST. PATRICK'S CALVARY

							i		1	-
Address	711 RICKETT ROAD					Form Required:	Yes	Χ	No	
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			
			Rul	es & Regulati	ions - Installation	Fee				
MARKER	S AND MONUMENTS CAN	NOT BE [	DELIVERED	IF THERE IS	NO FOUNDATIO	Ν.				
FOUNDA	TION FEE:									
FLUSH, E	BEVELS, SLANTS AND MC	NUMENT	3							
FOUNDA	TIONS ARE .50 PSI PLUS	2" ON EAG	CH SIDE, \$2	200.00 MINIMU	JM					
20"x 10" (	FLUSH CREMAINS) - \$150	0.00								
24"x 12" -	\$179.20									
36"x 12" -	\$256.00									
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CREM	IAINS PER GF	RAVE: 2					
Installatio	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	1-2500		Borders Required on Foundation:	Yes	No	
			(734) 621	-8950					
			Rı	ules & Regulations - In	stallation	Fee			
SINGLE (	GRAVE - MAX 24" LENGT	H x 22" HIG	SH .						
FOUNDA	TION FEE:								
.45 PSI									
Netee									
Notes:									
Installatio	on Fee Payable to:					Spring delivery begins (date):			
	RACE PARISH								
2996 W. I						Fall/Winter Delivery "cutoff" (date):			
	DN, MI 48117					auto,			
	· · ·, · · · · · · · · · ·								

# 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	Χ
Fax	(586) 668-0275					If yes, what symbol?			
Email	jpetersmith@comcast.net					Benches Permitted:	Yes	No	Х
Contact	JOSEPH SMITH FOREVER GREEN LAND	<b>Phone</b> 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 MC	NUMENTS	3					
FOREVE	R GREEN PUTS IN THE FO	DUNDATIO	ON. PLEAS	SE CALL BILL	SMITH FOR FOU	NDATION FEE.			
Notes "	OF FULL BUIDIAL O BED OBA	VE 4 " 0		0 DED 0D 4\/E	0.00.4.5111.4.410	4 ODEMATION DED ODANG			
Notes: #	OF FULL BURIALS PER GRA	VE: 1 # O	F CREMAIN:	S PER GRAVE:	2 OR 1 FULL AND	I CREMATION PER GRAVE			
Installation	on Fee Payable to:					Spring delivery begins (date):			
	R GREEN LANDSCAPING	CO.				YEAR ROUND			
P.O. BOX						Fall/Winter Delivery "cutoff" (date):			
	POINTE FARMS, MI 48236	6				YEAR ROUND			

## ST. PETER'S CATHOLIC- MT. CLEMENS

Address	43755 ELIZABETH RD.					Form Required:	Yes	!	No	Х
City	CLINTON TWP.	State	MI	Zip	48036	Grave Location Required on Memorial:	Yes	!	No	Χ
Phone	(586) 493-0086 (CEMETE	ERY)				Symbol Required on Memorial:	Yes	ļ	No	Χ
Fax	(586) 684-1868					If yes, what symbol?				
Email	cemeteryspmc@gmail.co	<u>im</u>				Benches Permitted:	Yes	!	No	Х
Contact	ROGER DARLING 586-243-0795 Cell	Phone	(586) 468 (CHURCH			Borders Required on Foundation:	Yes	<u> </u>	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.				
NO BASE	S ALLOWED ON SLANT I	MARKERS.								
24"x 12" E	BRONZE - \$150.00 FOR C	ONCRETE	SLAB							
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				
										•
Installatio	on Fee Payable to:					Spring delivery begins (date):				
ST. PETE	R'S CEMETERY					APRIL 1ST				
(SAME A	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						DECEMBER 1ST				

## ST. PETER'S LUTHERAN - EAST POINTE

Address	22950 GRATIOT AVE.					Form Required:	Yes		No	Χ
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	n Fee				
FOUNDA	TION FEE: VARIES - PLEA	ASE CALL	FOR PRICI	NG						
Notes: #	OF FULL BURIALS PER G	SRΔ\/F: 1	# OF CREN	ΛΔINS PER G	RAVE: LIP TO 4					
110ιος. π	OF TOLL BORNALOT ERC	JIVAVE. I	# OF OILE	MAINOT EN O	ICAVE. OF TO 4					
Installation	on Fee Payable to:					Spring delivery begins (date):				
ST. PETE	R'S LUTHERAN CEMETE	RY				WEATHER PERMITTING				
23000 GF	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?			
Email						Benches Permitted:	Yes	No	
Contact	FREIDA	Phone	(586) 781	-3434		Borders Required on Foundation:	Yes	No	
			Ru	iles & Regulati	ions - Installation	Fee			
CALL FOR	R PRICING								
Notes:									
		·				Continue delicemento esta e (deta):			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
Installatio	on Fee Payable to:					Spring delivery begins (date):			
Installatio	on Fee Payable to:					Fall/Winter Delivery "cutoff" (date):			

## ST. ROBERTS

						· ·			l l	
	CARPENTER RD.					Form Required:	Yes		No	Х
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?			<b>.</b>	
Email	N/A					Benches Permitted:	Yes	Х	No	
Contact	TIM @ GENESEE VALLEY VAULT	Phone Fax	(810) 695-9 (810) 735-9			Borders Required on Foundation:	Yes		No	Х
			Rul	es & Regulations - In	stallation	Fee				
FLUSH, S	LANTS, BEVELS & MONU	MENTS								
FOUNDA <sup>-</sup>	TION FEE:									
	 150.00 MINIMUM - Price in	cludes the	foundation a	and installation (as of	1-1-25)					
	alculated by the size of the b			•	,					
	,									
Notes: # 0	OF FULL BURIALS PER GRA	VE: 1 # OF	CREMAINS	PER GRAVE: 2 OR 1 F	ULL 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	11 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	<u> </u>	No	Х
Phone	(734) 663-5018					Symbol Required on Memorial:	Yes		No	Х
Fax	(734) 663-2847					If yes, what symbol?			=	
Email						Benches Permitted:	Yes	Х	No	
Contact		Phone				Borders Required on Foundation:	Yes		No	Х
			Rı	ules & Regulat	tions - Installation	 1 Fee				
FOUNDA	TION FEE:									
.65 PSI, N	 //INIMUM \$200.00									
BRONZE	, FLUSH GRANITE, SLAN	ITS, BEVEL	S, AND M	ONUMENTS						
34" MAXI	MUM FOR SINGLE									
MIN 4" TH	HICK GRANITE/MARBLE.	ALL MEMO	ORIALS ML	JST COMPLY \	WITH THE CEME	TERY APPEAL,				
NON TRA	ADITIONAL MONUMENTS	WILL NEE	D TO BE /	APPROVED BE	FORE PLACEME	NT.				
(THE CE	METERY HAS A RIGHT T	O REMOV	E OR NOT	ACCEPT AN U	JNDESIRED MON	(UMENT)				
						·				
Notes: # (	OF FULL BURIALS PER GR	AVF:1 # O	F CREMAIN	IS PER GRAVE	2 OR 1 FULL AND	1 CREMATION PER GRAVE				
1101001										
Installatio	on Fee Payable to:					Spring delivery begins (date):				
						WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						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	Χ
Phone	(810) 664-0821					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 664-1639					If yes, what symbol?				
Email	jschlaud@mayfieldtowns	hip.com				Benches Permitted:	Yes		No	Х
Contact	Julie A. Schlaud	Phone	(810) 66	4-0821		Borders Required on Foundation:	Yes	Χ	No	
http://www	v.mayfieldtownship.com/Sti	les_Cemet	ery.html			2" around (base of marker)				
			R	ules & Regulati	ions - Installation	Fee				
FLUSH, B	EVELS, SLANTS AND MC	NUMENTS	S.							
.40 PSI wi	th 2" border all 4 sides.									
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAI	NS PER GRAVE:	2 OR 1 FULL AND 1	CREMAIN PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
MAYFIELI	O TOWNSHIP					WEATHER PERMITTING				
(SAME AD	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING				

## STONEY CREEK

A -1 -1	EZO E TIENUZENI					Farms Danishadi	V	.,	] <sub>N.</sub> .	
	570 E. TIENKEN	_				Form Required:	Yes	X	No	
City	ROCHESTER	State	MI	Zip	48309	Grave Location Required on Memorial:	Yes		No	X
Phone	(248) 656-4630					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 656-4744					If yes, what symbol?			7	
Email	clerksoffice@rochesterhi	_				Benches Permitted:	Yes		No	Х
	iafratem@rochesterhills.	<u>org</u>				Borders Required on Foundation:	Yes		No	Х
Contact	MARIO									
			Ru	iles & Regulat	ions - Installation	Fee				
FLUSH, E	BEVELS, SLANTS AND M	ONUMENT	S							
RULES &	REGULATIONS ARE SP	ECIFIC TO	EACH SEC	CTION OF THE	CEMETERY.					
SEE CEM	ETERY RULES FOR SPE	CIFIC CEN	METERY RE	EGULATIONS.						
FOUNDA	TION FEES:									
SINGLE F	FLUSH/ SECTION 8 FLUS	H/ VETER	NS MARK	ERS & PLAQU	JES - <b>\$250</b>					
COMPAN	ION FLUSH - <b>\$400</b>									
SINGLE N	MONUMENT - <b>\$300</b>									
COMPAN	ION MONUMENT - \$550									
BENCH -	\$550									
	I 2 LARGE MONUMENTS	- VARIES	BY SIZE - F	PLEASE CALL						
Notes: #	OF FULL BURIALS PER GR	AVF· #O	F CREMAIN	S PER GRAVE	OR FULL AND	CREMATION PER GRAVE				
itotoo: "	<u> </u>		01121111111	0 1 211 010 10 1	011 102271112	ONE WITHOUT ENGINEE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
CITY OF	ROCHESTER HILLS, CLE	RK'S OFFI	CE			APRIL 15TH				
1000 RO	CHESTER HILLS DRIVE					Fall/Winter Delivery "cutoff" (date):				
	TER HILLS, MI 48308					NOVEMBER 1ST				

## SUNSET HILLS - FLINT

Address	G-4413 FLUSHING ROAI	D				Form Required: FORM	Yes	Х	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	Х
Fax	(810) 732-0260					If yes, what symbol?				
Email						Benches Permitted:	Yes		No	Х
Contact	SECRETARIAL STAFF	Phone	(810) 7	′32-0260		Borders Required on Foundation:	Yes		No	Х
				Rules & Regula	ations - Installatio	n Fee				
MONUME	ENTS ALLOWED IN SECTI	IONS A-C-	1-3-5, 1-	R, 2-R & 3-R AN	ND MUST BE 5 GR	AVE LOTS.				
CALL CE	METERY FOR SPECIFIC I	NFORMAT	TION ON	MONUMENTS.						
BASE MI	NIMUM 3'6"x 1'2"	BASE MA	AXIMUM	6'4"x 1'6"						
DIE/TABL	ET MINIMUM 2'6"x 2'	DIE/TABI	_ET MAX	KIMUM 5'x 2'8"						
FOUNDA	TION FEE: .50 psi									
FLUSH G	RANITE AND BRONZE M	ARKERS (	ONLY. II	NSTALLATION I	FEES:					
16"x 8" G	RANITE OR BRONZE - \$1	20.00 (INF	ANT)							
24"x 12" (	GRANITE - \$272.00									
24"x 12" (	OR 14" BRONZE - \$272.00	(Add \$120	).00 with	a vase)						
54"x 12" (	GRANITE - \$420.00 (COMF	PANION, C	NLY SIZ	ZE ALLOWED)						
44"x 12" (	OR 14" BRONZE - \$420.00	(COMPAN	IION, W	ITH OR WITHO	UT VASE)					
NO CAMI	EOS ALLOWED - MUST B	E LASER	ON JET	BLACK.						
Notes: #	OF FULL BURIALS PER GRA	AVE: # OF	CREMAI	NS PER GRAVE:	2 OR 1 FULL AND C	REMATION PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
SUNSET	HILLS CEMETERY					APRIL 16TH (MONDAY THRU FRIDAY	ONLY	")		
(SAME AI	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	Χ
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	Χ
			Ru	les & Regulat	ions - Installation	n Fee				
FLUSH M	IARKER AND MONUMENT	C SECTION	1							
FOUNDA	TION FEE:									
Formula f	or install: (ex: 24x12x4) Lei	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 LO	OTS MAX LENGTI	H IS 72"				
NO BRO	NZE ALLOWED									
*BENCHE	ES HAVE TO SHARE TWO	) GRAVES	AND MUST	<b>F</b> BE A PEDIS <sup>*</sup>	TAL WITH A MAT	CHING GRANITE BASE.				
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAINS	S PER GRAVE:	3 OR 1 FULL AND	2 CREMAINS PER GRAVE				
Installation	on Fee Payable to: <u>Cash</u> {	& Check A	ccepted			Spring delivery begins (date):				
WESTLA	WN CEMETERY					MARCH 15TH				
31472 MI	CHIGAN AVE.					Fall/Winter Delivery "cutoff" (date):				
WAYNE,	MI 48184					NOVEMBER 15TH				

## SUNSET MEMORIAL GARDENS

Address	3720 KEEWAHDIN ROA	D				Form Required:	Yes		No	Х
City	FORT GRATIOT TWP	State	MI	Zip	48059	Grave Location Required on Memorial:	Yes	Χ	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)	385-4489		Borders Required on Foundation:	Yes		No	Χ
				Rules & Regul	ations - Installat	ion Fee				
ALL FLUS	SH, GRANITE AND BRON	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	<b>4</b> "								
ANY NON	I-STANDARD SIZE MAKE	R15 PSI	OF SU	IRFACE AREA.						
MILITAR	/ BRONZE W/BASE 24"x	12"x 4" - \$5	3.00							
Notes: #	OF FULL BURIALS PER GR	RAVE: 1 # C	OF CREA	MAINS PER GRAV	/E: 3 OR 1 FULL A	ND 2 CREMAINS PER GRAVE				
Installatio	on Fee Payable to:					Spring delivery begins (date):				
FORT GF	RATIOT CHARTER TOWN	ISHIP				YEAR ROUND				
3720 KEE	WAHDIN ROAD					Fall/Winter Delivery "cutoff" (date):				
FORT GE	RATIOT, MI 48059					YEAR ROUND				

#### **THAYER**

A ddraaa	NAPIER & 6 MILE RD.					Form Required:	Voo		No	$\overline{}$
		<b>0</b>		<b>-</b> -		•	Yes		1	X
City	NORTHVILLE TWP.	State	MI	Zip		Grave Location Required on Memorial:		X	No	
Phone	(734) 453-0608					Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?			7	
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
			Pui	les & Regulations - I	netallation	Foo				
				_	iistaiiatioii	1 66				
	SLANTS, AND MONUMEN	TS. NOTH	ING OVER	3' HIGH.						
FOUNDA	TION FEE: 1.00 PSI									
Notes: #	OF FULL BURIALS PER GRA	AVE: #O	F CREMAINS	S PER GRAVE: OR	FULL AND	CREMATION PER GRAVE				
Installation	on Fee Payable to:					Spring delivery begins (date):				
O'MARCA	AIGH OUTDOOR SERVICE	ES <b>Jo</b> ł	ın O'Marcai	igh		WEATHER PERMITTING				
23113 CL	JRRIE RD.	Phone	(248) 231-	4113		Fall/Winter Delivery "cutoff" (date):				
SOUTH L	YON, MI 48178					WEATHER PERMITTING				

#### THETFORD TOWNSHIP

									_	
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	Х	No	
Contact	ROY HATCHETT OR	Phone	(810) 68	6-5200		Borders Required on Foundation:	Yes	Х	No	
	LEANNE PENNINGTON					2" border required				
			R	ules & Re	gulations - Installati	on Fee				
BRONZE,	FLUSH GRANITE, BEVEL	_S, SLANT	S, AND M	1ONUMEN	ΓS. VASES ALLOWI	ED ON BRONZE.				
ONE GRA	AVE				<b>TWO GRAVES</b>					
24"x 12" (	ON A 28"x 18" FOUNDATIO	ON - \$85.00	)		44"x 12" ON A 48"	'x 20" FOUNDATION - \$110.00				
24"x 14" (	ON A 28"x 18" FOUNDATIO	ON - \$90.00	)		44"x 14" ON A 48"	'x 20" FOUNDATION - \$110.00				
32"x 12" (	ON A 38"x 18" FOUNDATIO	ON - \$95.00	)		46"x 12" ON A 48"	'x 20" FOUNDATION - \$110.00				
32"x 14" (	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" (	ON A 44"x 18" FOUNDATIO	ON - \$100.0	00		FOUNDATION OF	56"x 22" - \$120.00				
42"x 14" (	ON A 44"x 18" FOUNDATIO	ON - \$100.0	00		FOUNDATION OF	72"x 18" (FENTON) - \$165.00				
BRONZE	FOR VA - \$95.00				FOUNDATION OF	76"x 18" - \$185.00				
Notes: #	OF FULL BURIALS PER G	SRAVE: 1	# OF CR	EMAINS PI	ER GRAVE: 4					
Installatio	on Fee Payable to:					Spring delivery begins (date):				

Installation Fee Payable to:
THETFORD TOWNSHIP
(SAME ADDRESS AS ABOVE)
https://www.thetfordtwp.com/clerk

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

#### **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) 92	1-0286		Borders Required on Foundation:	Yes	No	Χ
			R	ules & Regula	tions - Installatio	n Fee			
GRANITE	FLUSH MARKERS AND I	LEDGERS.							
DELIVER	IES ONLY TUES & FRI 10	)-12:30							
MUST NO	TIFY CEMETERY 2 DAYS	3 BEFORE	DELIVER	Y VIA EMAIL					
FOUNDA <sup>*</sup>	TION FEE:								
24"x 12"x	4" - \$375.00								
SLANTS (	(allowed only in Sec. CR) -	24"x 10"x ′	16" - \$475	.00					
HALF LED	DGERS - \$675.00. FULL L	EDGERS -	- \$875.00						
NOTE: FO	OR LEDGERS, PERSON I	NUST BE L	DECEASE	D (no pre-nee	d) - CALL FOR PL	ACEMENT.			
ONLY FL	JSH ALLOWED IN THE N	EW GARD	ENS						
LASERED	IMAGES ARE ACCEPTA	BLE							
We DO N	OT accept cameos unless	production	began be	fore Winter 202	21				
Trinity Ce	metery has the right to refu	ise any hea	dstone if t	:hese requirem	ents are not met.				
Notes: # (	OF FULL BURIALS PER GRA	AVE: 1 # OF	CREMAIN	S PER GRAVE:	2 OR 1 FULL AND 2	CREMAINS PER GRAVE			
Installatio	on Fee Payable to:			Cash & Che	eck	Spring delivery begins (date):			
TRINITY (	CEMETERY			CC by phon	ne	WEATHER PERMITTING			

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

# **TYLER**

Address	TYLER RD. & HANNAN F	RD.				Form Required:	Yes		No	Х
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	Х	No	
						*Note: Benches must not exceed	size of	grave		
			Rul	es & Regulat	ions - Installation	Fee				
CHARTE	R TOWNSHIP OF VAN BU	IREN, KIRK	K, CHUCK C	R SAM, TO S	TAKE GRAVE. T	HE FAMILY IS RESPONSIBLE FOR FO	UNDAT	TIONS.		
BENCHE	S MUST NOT EXCEED SIZ	ZE OF GRA	AVE. NO SI	JNDAY OR H	OLIDAY BURIALS					
INCH TO	INSTALL FOUNDATIONS	: \$1.00 PSI								
		•								
FOLINDA	TION FEE: \$50.00 (MARK	ING AND I	NSPECTIO	N)						
OONDA	TION I EE. \$50.00 (MARKIN	IIIO AIID I	NOI LOTIO	14)						
Notes: #	OF FULL BURIALS PER GRA	AVE: 1 # O	F CREMAIN:	S PER GRAVE:	2 OR 1 FULL AND	CREMATION PER GRAVE				
Installatio	on Fee Payable to:	CHE	CKS ONLY			Spring delivery begins (date):				
CHARTE	R TOWNSHIP OF VAN BU	IREN				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	Χ	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@TROY	<u>/MI.GOV</u>				Benches Permitted:	Yes		No	Х
	KURT BOVENSIEP or MON. SVCS - MS.UNLIMITED	Phone @YAHOO.COM	(248) 52 1 (586) 453-3		ME (586) 727-9062	Borders Required on Foundation:	Yes		No	Х
			F	Rules & Regul	lations - Installati	on Fee				
FOUNDA	TION FEE:									
ALL FOU	NDATIONS - \$0.65/SQ.	INCH CALC	JLATED (	ON BASE SIZE	E (3-1-24)					
VA MARE	BLE UPRIGHT INSTALL	FEE: \$190								
VA BRON	IZE HEADSTONE MOU	NTING: \$125	5							
CITY OF	TROY REQUIRES A 48	HOUR NOT	ICE FOR A	A FULL BURIA	AL.					
AND A 24	HOUR NOTICE FOR A	CREMAINS	BURIAL							
CONTAC	T KEDDY CHUTTI EWA		LIDDENIT	DDICES Hor	ma (E96) 727 0060	Coll (E96) 452 2952				
CONTAC	T KERRY SHUTTLEWC	KIN FOR C	UKKENI	PRICES - HOI	me (566) 727-9062	: Cell (366) 453-3653				
Notoo: #	OF FULL BURDAL C BED (	NDAVE. 4 # C	SE ODEMAI	NC DED CDAV	T. O.O.D. 4 FULL AND	24 ODEMATION DED CDAVE				
Notes. #	OF FULL BURIALS PER C	SKAVE. I # C	F CREIVIAI	NS PER GRAVI	E. 2 OR 1 FULL AND	D 1 CREMATION PER GRAVE				
Installatio	on Fee Payable to and	Mail to:				Spring delivery begins (date):				
	ENT SERVICES UNLIMI		H, CHECK			YEAR ROUND DELIVERY				
37640 30	MILE RD.					Fall/Winter Delivery "cutoff" (date):				
I ENNOX	MI 48050					YEAR ROUND DELIVERY				

# UNION UDELL

Address	TEXTILE RD (BET. TU	JTTLE HILL 8	BUNTO	N RDS)		Form Required:	Yes		No	Х
City	ANN ARBOR	State	MI	Zip	48197	Grave Location Required on Memorial:	Yes		No	Х
Phone						Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?			_	
Email						Benches Permitted:	Yes	Х	No	
Contact	JEROMY ZARKO	Phone	517-39	2-3889		Borders Required on Foundation:	Yes		No	Χ
				Rules & Re	egulations - Installation	Fee				
BRONZE,	FLUSH GRANITE, SLA	ANTS, BEVEL	S, AND	MONUMEN	ITS					
FOUNDA	TION FEE:									
.65 PSI, N	11NIMUM \$200.00									
ALL BASE	ES FOR MONUMENTS	MUST BE NO	) LONGE	ER THAN 34	4" ON A SINGLE GRAV	Ξ				
**ALL MA	RKERS ARE SUBJECT	TO THE API	PROVAL	OR DENIA	L OF THE CEMETERY	BOARD.				
Notes: # (	OF FULL BURIALS PER G	SRAVE: 1 # O	F CREMA	AINS PER GF	RAVE: 2 OR 1 FULL AND	I CREMATION PER GRAVE				
Installatio	on Fee Payable to: CA	SH CHECKS	ONLY			Spring delivery begins (date):				
	-					WEATHER PERMITTING				
						Fall/Winter Delivery "cutoff" (date):				
						OCTOBER 1ST				

## **UNITED MEMORIAL GARDENS**

Address	4800 CURTIS RD.					Form Required: MSLIA 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	SEND A	PPROVA	LS TO THE	FOLLOWING:	If yes, what symbol?					
tmosh@e	verstorypartners.com	and cc	jlamo@	<u>@everstorypa</u>	rtners.com	Benches Permitted-With Placement Form	Yes	Χ	No		
	Taylor Mosher  Partners			Phone	(734) 454-9448	Borders Required on Foundation:	Yes		No	Χ	
Eversion				Rules & Red	gulations - Installatio	on Fee					
EL 11011 O		AUV FIII		•							
	RANITE AND BRONZE O										
						ONZE BASE ALLOWED. NO SLANTS ALL	.OWED	!			
ALL OUT:	SIDE CAMEOS MUST BE	STEEL. C	EMETER	RY DOES NO	T REPLACE BROKE	N CERAMIC CAMEOS.					
All Memoi	rials and Benches require	Memorial A	Applicatio	n and Approv	val						
CEMETE	RY FEES: new pricing	g effective	10-7-24		MEMORIAL SURV	YEY LAYOUT INSPECTION ASSESSMEN	IT FEE	(MSLI	A):		
					COMPANION/ BEI	NCH/ PRIVATE COLUMBARIA - \$1,499.00	)				
Foundation	on Fee: \$1.00 PSI Payab	le to Unite	ed Memo	rial	SINGLE/ BOULDE	R/ CREMATION MEMORIAL - \$899.00					
	(in addition to	flagging fo	ee)		VETERAN/ BABY/	INFANT/ PET - \$499.00					
INCH ME	MORIALS SETTING FEE	\$1.00 PS	l payable	e to Inch Men	norials						
MEMORIA	AL REMOVAL FEE: \$75.0	00				ISLAMIC GARDENS - SECTION 1 - 36	6" WIDE	MAX			
BENCHE	S REQUIRE A GRANITE I	BASE - BA	SE IS FC	OUNDATION	FOR BENCHES.	SECTIONS 2 & 3 - 32	2" WIDE	E MAX			
UMG STA	ATED MUST BE FLAT FLU	JSH BUT 1	THERE A	RE SOME AI	BOVE GROUND						
						D 1 CREMATION PER GRAVE					
1101001 //	or roll borning rent or		or or can	7		on enemander en outve				<u> </u>	
Installatio	on Fee Payable to:					Spring delivery begins (date):					
						WEATHER PERMITTING					
						Fall/Winter Delivery "cutoff" (date):					
	YEAR ROUND DELIVERY - WEATHER PERMITTING										

# <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		Χ
Fax	N/A					If yes, what symbol?				
Email	CCUDDINGTON3@GM	AIL.COM				Benches Permitted:	Yes	No	· L	Χ
Contact	CHUCK CUDDINGTON LAURA SALANSKI @ (5		. ,	703-8453		Borders Required on Foundation:	Yes	No	L	
				Rules & Regul	ations - Installatio	on Fee				
FLUSH, B	EVELS, SLANTS AND M	ONUMENT	S.							
	TION 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 C	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 T	ΓWP., MI 48317					WEATHER PERMITTING				

### **VAN HOOSEN JONES**

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

CITY OF ROCHESTER HILLS, CITY CLERK

1000 ROCHESTER HILLS

ROCHESTER HILLS, MI 48309

Installation Fee Payable to:

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		No	Χ
City	WALLED LAKE	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 @		(248) 887	-6700	Borders Required on F	oundation:	Yes	Χ	No	
НСМ	HURON CEMETERY MA	INTENANC	E		2" bord	der on all sides				
			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 SE	ETTING OF GRANITE & B	RONZE OI	N GRANITE	(NO FOUNDATION)						
\$0.50 PSI	, MINIMUM \$175.00									
FOUNDA <sup>-</sup>	TION FEE FOR MONUME	NTS & BRO	ONZE ON (	CONCRETE (NON VA)						
\$0.70 PSI	OF FOUNDATION, MININ	ИUM \$250.0	00							
ALL FOU	NDATIONS MUST BE 2" L	ARGER O	N ALL SIDE	S THAN MONUMENT	BASE.					
ADD 4" T0	D LENGTH AND WIDTH C	OF BASE T	O DETERM	IINE 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 FOR	R BUILT IN VASE)					
Notes: #	OF FULL BURIALS PER (	GRAVE: 1	# OF CRE	MATION BURIALS PER	GRAVE: 2-4					
(C	ALL MIKE @ HURON CEN	METERY M	IAINTENAN	ICE FIRST)						
Installatio	on Fee Payable to:	CASH, CH	HECK		Spring delivery begir	ns (date):				

WEATHER PERMITTING

WEATHER PERMITTING

Fall/Winter Delivery "cutoff" (date):

## WASHTENONG MEMORIAL PARK

Address	3771 WHITMORE LAKE	ERD.				Form Required:	MSLIA FORM	Yes	Χ	No	
City	ANN ARBOR	State	MI	Zip	48105	Grave Location F	Required on Memorial:	Yes		No	Х
Phone	(734) 665-6187					Symbol Required	on Memorial:	Yes		No	Х
Fax	(734) 665-3264					If yes, what syn	nbol?			1	
Email	jlamo@everstorypartner	rs.com				Benches Permitte	ed:	Yes	Х	No	
	JENNIFER LaMONT / Partners	Phone	(734) 66	65-6187		Borders Required	d on Foundation:	Yes		No	Х
			F	Rules & Regu	lations - Installatio	n Fee					
ALL FLUS	SH BRONZE ONLY. BRO	ONZE MUST	BE ON A	A GRANITE BA	ASE. ANY COLOR (	GRANITE BRONZE	Ē				
BASE ALI	LOWED. VASES ALLOV	VED. BENC	HES ALL	OWED THRO	UGHOUT CEMETE	RY.					
MONUME	ENTS ALLOWED ONLY I	N QUEEN C	F PEACE	SECTION A	ND MAPLE GROVE	SECTION.					
CEMETE	RY FEES: new pricit	ng effective	10-7-24		MEMORIAL SURVE	EY LAYOUT INSPE	ECTION ASSESSMEN	T FEE	(MSLI	A):	
					COMPANION/ BEN	CH/ PRIVATE COL	.UMBARIA - \$1,499.00	)			
Foundati	on Fee: \$1.00 PSI Paya	able to Wasl	ntenong	Memorial	SINGLE/ BOULDER	/ CREMATION ME	MORIAL - \$899.00				
	(in addition to	flagging fe	e)		VETERAN/ BABY/ I	NFANT/ PET - \$49	9.00				
INCH ME	MORIALS SETTING FEE	E: \$1.00 PS	payable	to Inch Memo	rials						
MEMORIA	AL REMOVAL FEE: \$75.	.00									
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CF	REMAINS PER	R GRAVE: UP TO 4						
(	OR 1 FULL AND UP TO	3 CREMAIN	S PER GI	RAVE							
						Г					1
Installatio	on Fee Payable to:					Spring delivery	begins (date):				
						WEATHER PERI	MITTING				
						Fall/Winter Deliv	very "cutoff" (date):				
						WEATHER PERI	MITTING				

### WATERFORD CENTER

Δddress	PONTIAC LAKE & AIRPO	DRT RD				Form Required:	Yes		No	Х
City	WATERFORD	State	MI	Zip	48329	Grave Location Required on Memorial:			No	X
Phone	(248) 618-7437					Symbol Required on Memorial:	Yes		No	Х
Fax	(248) 674-8658					If yes, what symbol?			1	
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	Х
			Rul	es & Regulati	ions - Installation	Fee				
FLUSH, G	GRANITE, BEVELS, SLANT	ΓS AND MC	NUMENTS	S. SINGLE GF	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	IIMUM \$28	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	N FOUNDATION - \$100.00									
PROPER	PLACEMENT OF NAMES	MUST BE	OKAYED B	Y A REPRESI	ENTATIVE FROM	THE FAMILY AND SEXTON (TIM SIMM	IONS 2	48-804	1-0649)	).
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	۱LL FIR	RST)		
(SAME AI	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):				
						WEATHER PERMITTING (PLEASE CA	ALL FIR	RST)		

### WEST BERLIN (OLD SANDHILL CEMETERY)

Address	HOLEMS RD.				Form Required:	Yes	No	Х
City	ALLENTON	State	MI	Zip	Grave Location Required on Memorial:		No	Х
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	
			Ru	ıles & Regulations - Installatior	n Fee			
Notes:								
Installatio	on Fee Payable to:	Cash & Ch	neck		Spring delivery begins (date):			
JERRY P	EWINSKI				MARCH 15TH			
8051 ALM	MONT RD.				Fall/Winter Delivery "cutoff" (date):			
AI MONT	MI 48003				NOVEMBER 15TH			

### WESTLAWN

Address	31472 MICHIGAN AVE.					Form Required:	Yes	No	Х
City	WAYNE	State	MI	Zip	48184	Grave Location Required on Memorial:	Yes	No	Х
Phone	(734) 722-2530					Symbol Required on Memorial:	Yes	No	Χ
Fax	(734) 641-9400					If yes, what symbol?			
Email	covenantwest@hotmail.	<u>com</u>				Benches Permitted:	Yes	No	Х
Contact	VIRGINIA CARTER	Phone	(734) 72	22-2530		Borders Required on Foundation:	Yes	No	Х
			F		julations - Installat	on Fee			
FLUSH G	RANITE, SLANTS AND N	MONUMENT	rs. FLUS	H ONLY IN	CERTAIN SECTION	IS - CALL FIRST.			
CAN HAV	E VASE MOUNTED ON	SLANT OR	MONUME	ENT BASE.					
FOUNDA	TION FEE:								
Formula f	or install: (ex: 24x12x4) (	_ength) 24	x \$16.50 =	= \$396.00					
LENGTH	X's \$16.50 = Foundation	FEE							
SINGLE (	GRAVE MAX WIDTH IS 3	6" - UNLES	S TWO S	IDE-BY-SID	E LOTS MAX LENG	TH IS 72"			
NO BRON	IZE AND NO BENCHES	ALLOWED.							
Notes: # 0	OF FULL BURIALS PER GF	RAVE: 1 (UNL	ESS IN DO	OUBLE DEPT	TH SECTION, THAN 2	ALLOWED)			
#	OF CREMAINS PER GRAV	E: 3							
Installatio	on Fee Payable to:	Cash & C	heck			Spring delivery begins (date):			
	WN CEMETERY					MARCH 15TH			
	DDRESS AS ABOVE)					Fall/Winter Delivery "cutoff" (date):			
(0/ /	, , , , , , , , , , , , , , , , , , , ,					NOVEMBER 15TH			

#### **WHITE CHAPEL**

Address	621 WEST LONG LAKE F	RD.				Form Required: FORM	Yes	Χ	No	
City	TROY	State	MI	Zip	48098	Grave Location Required on Memorial:	Yes		No	Χ
Phone	(248) 362-7670					Symbol Required on Memorial:	Yes		No	Χ
Fax	(248) 688-9442					If yes, what symbol?				
Email	johnstad@whitechapelcen	netery.com	_			Benches Permitted:	Yes		No	Χ
Contact	JOHN OHNSTAD	Phone	(248) 817-	-5130		Borders Required on Foundation:	Yes	·	No	Χ
	<b>GRAVE LOCATION OR SIDES</b>	VERIFICATION	ON FAX (248)	362-7683						

#### Rules & Regulations - Installation Fee - Colored Cameos Allowed

**BRONZE ONLY**. VASES ALLOWED. GRANITE BASE NOT REQUIRED, BUT MUST BE SUNRISE PINK WITH SAWN SIDES IF ORDERED. ALL ORDERS NEED PRIOR APPROVAL BY CEMETERY. 16"x24" BRONZE MEMORIALS ARE ONLY ALLOWED IN THE GARDEN OF TOGETHERNESS LAWN CRYPT GARDEN.

<u>WITHOUT GRANITE BASE</u>	WITH GRANITE BASE	<u>WITHOUT GRANITE BASE</u>	WITH GRANITE BASE
16"x 24" - \$622.00 W/O VASE	16"x 24" - \$745.00 W/O VASE	44"x 13" - \$797.00 W/O VASE	44"x 13" - \$968.00 W/O VASE
16"x 24" - \$633.00 W/ VASE	16"x 24" - \$760.00 W/ VASE	44"x 13" - \$807.00 W/ VASE	44"x 13" - \$990.00 W/ VASE
24"x 12" - \$432.00 W/O VASE (SAME W/VASE)	24"x 12" - \$527.00 W/O VASE	44"x 14" - \$845.00 W/O VASE	44"x 14" - \$1,027.00 W/O VASE
24"x 14" - \$489.00 W/O VASE	24"x 14" - \$606.00 W/O VASE	44"x 14" - \$855.00 W/ VASE	44"x 14" - \$1,050.00 W/ VASE
24"x 14" - \$500.00 W/ VASE	24"x 14" - \$618.00 W/ VASE	24"x 30" - \$1,001.00 W/O VASE	24"x 30" - \$1,150.00 W/O VASE
28"x 16" - \$672.00 W/O VASE	28"x 16" - \$800.00 W/O VASE	24"x 30" - \$1,011.00 W/ VASE	24"x 30" - \$1,170.00 W/ VASE
28"x 16" - \$682.00 W/ VASE	28"x 16" - \$812.00 W/ VASE	BABY MARKER (NO GRANITE BASE)	TEXAS PEARL
36"x 13" - \$711.00 W/O VASE	36"x 13" - \$854.00 W/O VASE	20"x 10" - \$331.00 W/O VASE	24"x 13" - \$480 W/ VASE
36"x 13" - \$721 00 W/ VASE	36"x 13" - \$875.00 W/ VASE	9"x 18" - \$262.00 W/O VASE	24"x 13" - \$468 W/O VASE

FAMILIES CAN HAVE 2 SINGLES ON 1 GRAVE FOR EITHER 2 CREMATIONS OR 1 CREMATION AND 1 FULL BURIAL IN A SPACE. 36" x 13" MEMORIALS ARE ONLY ALLOWED AS A COMPANION MEMORIAL ON 1 GRAVE ONLY. 44" x 13" COMPANION IS THE SMALLES COMPANION MEMORIAL FOR 2 GRAVES.

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):
CAN DELIVER BRONZE YEAR ROUND

### WHITE LAKE

HIGHLAND, MI 48357

									1	
Address	6190 WHITE LAKE RD.				Form Required:		Yes		No	X
City	WHITE LAKE TOWNSHIF State	MI	Zip	48383	Grave Location Required on	Memorial:	Yes		No	Х
Phone	(248) 887-6700				Symbol Required on Memori	al:	Yes		No	Χ
Fax	(248) 887-4487				If yes, what symbol?				-	
Email					Benches Permitted: Call	contact	Yes		No	
Contact		e (248) 88	37-6700		Borders Required on Founda	ation:	Yes	Χ	No	
HCM	HURON CEMETERY MAINTENAN	CE			2" border on	all sides				
						LAVOLIT	C BALLCT			
BRONZE	, FLUSH GRANITE, SLANTS, AND N	MONUMEN	NTS - 30" MA	XX PER GRAVE		LAYOUT: SUBMIT		- 1		
GOVERN	IMENT ISSUED MARKERS - ALL TY	<u> PES\$2</u>	<u>250.00</u>			TOWNSH		"		
FLUSH S	ETTING OF GRANITE & BRONZE O	N GRANI	TE (NO FOL	JNDATION)		SEXTON				
\$0.50 PS	I, MINIMUM \$175.00					APPROV	AL			
FOUNDA	TION FEE FOR MONUMENTS & BF	ONZE ON	N CONCRET	E (NON VA)						
\$0.75 PS	I OF FOUNDATION, MINIMUM \$250	.00								
ALL FOU	NDATIONS MUST BE 2" LARGER C	N ALL SI	DES THAN N	MONUMENT BASE	Ξ.					
ADD 4" T	O LENGTH AND WIDTH OF BASE	TO DETER	RMINE FOUN	NDATION SIZE N	EEDED.					
ADD \$50.	.00 FOR BUILT IN VASE									
MISCELL	ANEOUS ITEMS									
CORNER	MARKERS (SET OF 4)\$125.00									
VASE ON	NLY\$100.0	0 (ADD \$5	0.00 FOR A	LL FEES FOR BU	ILT IN VASE)					
Notes: #	OF FULL BURIALS PER GRAVE: 1	# OF CR	EMATION B	URIALS PER GRA	AVE: 2-4					
(C	CALL MIKE @ HURON CEMETERY I	MAINTENA	ANCE FIRST	<u> </u>						
Installation	on Fee Payable to:				Spring delivery begins (da	te):				
HURON (	CEMETERY MAINTENANCE				WEATHER PERMITTING					
P.O. BOX	(112				Fall/Winter Delivery "cutof	f" (date):				

WEATHER PERMITTING

### WHITMORE LAKEVIEW

Address	9 MILE ROAD AND EAST	SHORE D	RIVE			Form Required:	Yes		No	Χ
City	WHITMORE LAKE	State	MI	Zip	48189	Grave Location Required on Memorial:	Yes	Χ	No	
Phone	(810) 231-1333					Symbol Required on Memorial:	Yes		No	Χ
Fax	(810) 231-5080					If yes, what symbol?			-	
Email	CLERK@GREENOAKTW	P.COM				Benches Permitted:	Yes	Χ	No	
Contact	MICHAEL SEDLAK	Phone	(810) 231-	1333		Borders Required on Foundation:	Yes	Χ	No	
	TOWNSHIP CLERKS DEPT.					2" border required				
			Rul	es & Regulation	ons - Installation	Fee				
FOUNDA <sup>®</sup>	TION FEE:									
24"x 12" -	\$195.00	28" X 16"	- \$250.00							
36"x 12" -	\$290.00	40" X 16"	- \$350.00							
48"x 12" -	\$390.00	48" X 16"	- \$450.00							
CREMAT	ON BURIAL VAULT - \$275	.00								
ODD SIZE	ED FOUNDATIONS USE .6	0 PSI.								
**CALL C	LERKS OFFICE BEFORE D	DELIVERY	SO GRAVE	E CAN BE STA	KED					
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):				
GREEN C	OAK CHARTER TOWNSHIP	•				WEATHER PERMITTING				
10001 SIL	VER LAKE RD.					Fall/Winter Delivery "cutoff" (date):				
BRIGHTC	N, MI 48116					WEATHER PERMITTING				

#### **WIXOM**

P.O. BOX 112

HIGHLAND, MI 48357

										_	
Address	NW CORNER OF NORTH	NIXOM ANI	W. MAP	LE RD.		Form Required:		Yes		No	Х
City	WIXOM	State	MI	Zip		Grave Location Requi	red on Memorial	: Yes		No	Х
Phone	(248) 887-6700					Symbol Required on N	Memorial:	Yes		No	Χ
Fax	(248) 887-4487					If yes, what symbol?				_	
Email						Benches Permitted:	Call contact	Yes		No	
Contact	MIKE WILLENBERG		<b>e</b> (248) 8	87-6700		Borders Required on I	Foundation:	Yes	Χ	No	
НСМ	HURON CEMETERY MA	INTENAN	CE			2" bor	der on all sides				
				Rules & Regulations - Ir	nstallation	Fee					
BRONZE,	FLUSH GRANITE, SLAN	TS, AND M	ONUME	NTS - 36" MAX PER GRA	AVE						
GOVERN	MENT ISSUED MARKERS	S - ALL TY	PES\$	<u> </u>			ANNA - CL	ERK OF	FICE		
FLUSH SETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)							248-624-4	557			
\$0.50 PSI, MINIMUM \$175.00											•
FOUNDA <sup>*</sup>	TION FEE FOR MONUME	NTS & BR	ONZE O	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 SI	DES THAN MONUMENT	BASE.						
ADD 4" To	O LENGTH AND WIDTH (	OF BASE T	O DETE	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 \$	50.00 FOR ALL FEES FO	R BUILT I	N VASE)					
Notes: #	OF FULL BURIALS PER	GRAVE: 1	# OF CR	REMATION BURIALS PER	R GRAVE:	2					
(C	ALL MIKE @ HURON CEI	METERY N	MAINTEN	ANCE FIRST)							
					_						
Installatio	on Fee Payable to:	CASH, C	HECK			Spring delivery begin	ns (date):				
HURON C	CEMETERY MAINTENANO	CE CC V	IA PHON	<u>IE</u>	WEATHER PERMITTING						

Fall/Winter Delivery "cutoff" (date):

WEATHER PERMITTING

# **WOODLAWN**

Address	19975 WOODWARD AV	/E.				Form Required: MSLIA FORM Yes X No	
City	DETROIT	State	MI	Zip	48203	Grave Location Required on Memorial: YesNo	Χ
Phone	(313) 368-0010					Symbol Required on Memorial: YesNo	Χ
						If yes, what symbol?	
Email	380-vendor@everstoryp	artners.com	<u>l</u>			Benches Permitted: Call first Yes X No	
Contact	=	Phone	(586) 2	41-2969		Borders Required on Foundation: Yes X No	
Everstory	Partners					2" border on all sides	
				Rules & Regu	ulations - Inst	allation Fee	
GRANITE	, BRONZE AND MONUM	IENTS IN D	ESIGNA <sup>-</sup>	ΓED AREAS.	NO BRONZE	VASES ALLOWED.	
SECTION	S <b>29, 33, 37</b> AND <b>FRON</b>	<b>Γ OF 34</b> AR	E BRON	ZE ONLY. BR	RONZE MUST	HAVE GRANITE BASE.	
ANY COL	OR GRANITE BRONZE E	BASE IS AL	LOWED.	BENCHES C	OR UPRIGHTS	NEED PRIOR APPROVAL,	
ARE REQ	UIRED TO GO ON MON	UMENT EA	SEMENT	, AND IS ADD	DITIONAL \$50	0.00 UNLESS PURCHASED	
THRU CE	METERY, THEN WAIVE	D.					
NO SLAN	TS ALLOWED						
CEMETE	RY FEES: new pricin	g effective	10-7-24		MEMORIAL	SURVEY LAYOUT INSPECTION ASSESSMENT FEE (MSLIA):	
					COMPANIO	I/ BENCH/ PRIVATE COLUMBARIA - \$1,499.00	
Foundation	on Fee: \$1.00 PSI Paya	ble to Woo	dlawn C	emetery	SINGLE/ BO	JLDER/ CREMATION MEMORIAL - \$899.00	
	(in addition to	flagging fe	ee)		VETERAN/ E	ABY/ INFANT/ PET - \$499.00	
INCH ME	MORIALS SETTING FEE	:: \$1.00 PS	I payable	to Inch Memo	orials		
MONUME	NT, BENCHES AND LED	GERS \$1.0	00 PSI				
MEMORIA	AL REMOVAL FEE: \$75.0	00					
Notes: #	OF FULL BURIALS PER GI	RAVE: 1 # C	F CREMA	INS PER GRA	VE: 2 OR 1 FUL	L AND 1 CREMATION PER GRAVE	
Installatio	on Fee Payable to:					Spring delivery begins (date):	
						WEATHER PERMITTING	
						Fall/Winter Delivery "cutoff" (date):	
						WEATHER PERMITTING ON GROUND FROZEN	

# **WOODMERE**

									_	
Address	9400 W. FORT STREE	ĒΤ				Form Required: MSLIA FORM	Yes	Χ	No	
City	DETROIT	State	MI	Zip	48209	Grave Location Required on Memorial: `	Yes		No	Χ
Phone	(313) 841-0188					Symbol Required on Memorial:	Yes		No	Х
Fax						If yes, what symbol?				
Email	yures@everstorypartne	ers.com or m	nelme@eve	erstorypartn	ners.com	Benches Permitted: See note below	Yes	Χ	No	
Contact	Yanet Uresti or Melan	ie Elmer	Phone	(313) 84	1-0188	Borders Required on Foundation:	Yes		No	Х
Everstory	/ Partners					2" border on all sides				
			F	Rules & Re	gulations - Install	ation Fee				
GRANITE	AND BRONZE ONLY.	BRONZE M	IUST HAVI	E GRANITE	BASE. NO BRO	NZE VASES.				
ANY COL	OR OF GRANITE BRO	NZE BASES	ALLOWE	D. MONUM	ENTS IN DESIGNA	ATED AREAS ONLY				
CEMETE	RY FEES: new pric	ing effective	e 10-7-24		MEMORIAL SU	JRVEY LAYOUT INSPECTION ASSESSMENT	FEE (	(MSLI	<b>A)</b> :	
					COMPANION/	BENCH/ PRIVATE COLUMBARIA - \$1,499.00				
Foundation	on Fee: \$1.00 PSI Pay	able to Wo	odmere Ce	emetery	SINGLE/ BOUL	DER/ CREMATION MEMORIAL - \$899.00				
	(in addition	to flagging t	fee)		VETERAN/ BAE	BY/ INFANT/ PET - \$499.00				
INCH ME	MORIALS SETTING FE	EE: \$1.00 P	SI payable	to Inch Mer	morials					
ALL SLAI	NTS AND BENCHES R	EQUIRE A C	RANITE E	BASE						
Ground S	uperintendent MR. ANI	ORE ROCKS	3 (313) 482	-0328						
GROUND	S SUPERINTENDENT	IS TO BE N	OTIFIED P	RIOR TO D	ELIVERY. Delivery	y Hours 9AM-2PM				
3' BENCH	IES PERMITTED ON O	NE SPACE.								
4' and Lar	ger BENCHES ALLOW	ED (IF MOR	E SPACES	HAVE BE	EN PURCHASED	TO FIT).				
Notes: #	OF FULL BURIALS PE	R GRAVE: 1	# OF CR	EMAINS P	ER GRAVE: 2					
Installatio	on Fee Payable to:					Spring delivery begins (date):				
						APRIL 1ST OR WEATHER PERMITTING	G			
						Fall/Winter Delivery "cutoff" (date):				
						NOVEMBER 1st				

# WORDEN - SALEM

								ſ			
Address	6185 FIVE MILE RD.					Form Required: FOR	<u>M</u>	Yes	Χ	No	
City	NORTHVILLE	State	MI	Zip	48168	Grave Location Require	ed on Memorial:	Yes		No	
Phone	(248) 437-5360					Symbol Required on Me	emorial:	Yes		No	
Fax						If yes, what symbol?	*See Below			Ī	
Email	lilacridge@charter.net					Benches Permitted:		Yes		No	
Contact	STEVE ROBERTS	Phone	(248) 437	-5360		Borders Required on Fo	oundation:	Yes		No	
			Ru	ıles & Regu	ılations - Installation	Fee					
STEVE W	ILL PUT IN FOUNDATION	IS BUT PF	REFERS IN	CH PUTS T	HEM IN.						
CONTAC	T STEVE TO SEE WHO H	E WANTS	TO PUT F	OUNDATIO	N IN AND SEE IF GR	AVE IS FLAGGED.					
Notes:											
notes:											
——— Mailing A	ddress: WORDEN CEM	ETERY AS	SOCIATIO	N		Spring delivery begins	s (date):				
	C/O STEVEN J. I	ROBERTS	}			_					
	72446 6 MILE RO	DAD				Fall/Winter Delivery "o	cutoff" (date):				
	NORTHVILLE, M	II 48168					. ,				

# WORKMEN'S CIRCLE

Address	33550 GRATIOT AVENU	F				Form Required: FORM	Yes	Х	No	
City	CLINTON TWP.	State	MI	Zip	48035	Grave Location Required on Memorial:			No	Х
Phone	N/A	Otato	IVII	Lip	40000	Symbol Required on Memorial:	Yes		No	Х
Fax	N/A N/A					•	169		livo I	٨
Email	tila@hebrewmemorial.org	l .				If yes, what symbol? *See Below	V		l I	V
	-		4			Benches Permitted:	Yes		No	Х
Contact	Tila @ Hebrew Memorial	Phone -	(248) 543			Borders Required on Foundation:	Yes	Х	No	
		Fax	(248) 543-			2" border on all sides				
			Ru	les & Regulat	ions - Installation	Fee				
WORKMA	AN'S CIRCLE IS MAINTAIN	NED BY HE	BREW ME	MORIAL PAR	CEMETERY.					
PLEASE (	CALL FOR SECTION VER	IFICATION								
*HEBREV	WWRITING OF NAME AN	D DATE O	F DEATH A	RE REQUIRE	D ON THE STONI	<u>.</u>				
FOUNDA	TION FEE:									
SINGLE (	 GRAVE - \$300.00									
	GRAVE - \$600.00									
	01.0.1.1									
DEDMIT I	S REQUIRED									
FERIVITI	3 REQUIRED									
Notes: #	OF FULL BURIALS PER C	GRAVE: 1	# OF CRE	MAINS PER C	BRAVE: 0					
Installation	on Fee Payable to:	CASH CH	ECK			Spring delivery begins (date):				
HEBREW	MEMORIAL CHAPEL	CREDIT	CARD			WEATHER PERMITTING				
26640 GF	REENFIELD					Fall/Winter Delivery "cutoff" (date):				
OAK PAR	K, MI 48237					WEATHER PERMITTING				

# <u>YERKES</u>

Address	8 MILE ROAD	Form Required:	Yes	ı	No	Х
City	NORTHVILLE CHARTER TWP State MI Zip	Grave Location Required on Memorial:	Yes	r	No	Х
Phone		Symbol Required on Memorial:	Yes	I	No	Х
Fax		If yes, what symbol?				
Email		Benches Permitted:	Yes		No	
Contact	Phone	Borders Required on Foundation:	Yes	1 X	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					ļ
FLUSH S	ETTING OF GRANITE & BRONZE ON GRANITE (NO FOUNDATION)					ļ
						ļ
ALL FOLL	NDATIONS MUST BE 2" LARGER ON ALL SIDES THAN MONUMENT	RASE				
	O LENGTH AND WIDTH OF BASE TO DETERMINE FOUNDATION SIZ					
ADD 4 i	O LENGTH AND WIDTH OF BASE TO DETERMINE FOUNDATION SIZ	ZE NEEDED.				
Notes: #	OF FULL BURIALS PER GRAVE: 1 # OF CREMATION BURIALS PER	R GRAVE: 2				
Installati	on Fee Payable to: <u>CASH, CHECK</u>	Spring delivery begins (date):				
	CC VIA PHONE	WEATHER PERMITTING				
		Fall/Winter Delivery "cutoff" (date):				
		WEATHER PERMITTING				