



# CEMETERY PLOT PURCHASE

601 2<sup>nd</sup> Street  
Griswold, IA 51535  
Phone: 712-778-2615  
Fax: 712-778-2619  
griscity@netins.net

Complete the following information to the best of your ability and submit with payment to Griswold City Hall in order to obtain cemetery deed. Please allow two weeks for processing, formal cemetery deed to follow.

## DEED OWNER INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## OWNER'S NEAREST RELATIVE

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relation to Owner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## PERSONAL INFORMATION

*Please fill out this section for each person to be buried on the lot purchased.*

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Alias: \_\_\_\_\_ Sex: \_\_\_\_\_ Religion: \_\_\_\_\_

Uniformed Service: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Birth City: \_\_\_\_\_ Birth State: \_\_\_\_\_

- Mayor Brad Rhine
- City Manager Laura Hansen
- City Clerk Hannah Bierbaum

- Council Members  
Julie Adams, Ryan Askeland, Carol Preston,  
Carmen Sorensen, Kirk Stapleton

## PERSONAL INFORMATION

*Please fill out this section for each person to be buried on the lot purchased.*

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Alias: \_\_\_\_\_ Sex: \_\_\_\_\_ Religion: \_\_\_\_\_

Uniformed Service: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Birth City: \_\_\_\_\_ Birth State: \_\_\_\_\_

## PERSONAL INFORMATION

*Please fill out this section for each person to be buried on the lot purchased.*

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

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Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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## OFFICE USE ONLY

Division No. \_\_\_\_\_ Lot No. \_\_\_\_\_ Plot No. (if applicable) \_\_\_\_\_

Other Description of Area Purchased: \_\_\_\_\_

Deed Price: \_\_\_\_\_ Purchase Date: \_\_\_\_\_