FOUNDATION REQUEST	DATE:	
Monument Company Information:		
Company Name:		
Contact Name:	_Email:	
Phone #: Fax #:		
Customer (Person Placing Order):		
Rights Holder Name (Monument Name):		
Comotomy	on where monument to be placed.)	
Foundation Size Required: (Check one)	Size	Cost
Monument Size:	Under 36 Inches	\$400.00
Length x Width x Height	36 to 48 Inches	\$500.00
Base Size: Length x Width	48 to 60 Inches	\$800.00
-	Over 60 Inches	\$900.00
Foundation Size: Length x Width	Pad Base (Flat Marker)	\$200.00
*Foundation size to be calculated based on 1" larger than base size, length and width.	Install Ground Setting (No C&M cost)	\$35.00
		1 I
Example: "centered over 2 lots"		
Authorized By:		
** Monument Company	** Rights Holder or Repre	sentative
Please complete and fax (705)724-5385 or el **Request MUST be signed by representatives of the Monument Co		
Office Use:		
Lot Location Completed by:		Paid 🛛
Date Competed: Monume	ent Company notified: 🗌 Date:	
CEMETERY WORK REQUEST/NOTIFICATION:		
Date work to be performed:	Time:	
Description:		
Monument/Marker Delivery and Installation	□ Inscription/Repair □	]
Contact Information for Most Responsible Worker o	on-site:	
Name Township Approval:	Cell Phone	
	ant Company political. D Data	
Township Representative	ent Company nofitied: 🛛 Date:	