



Interment Request Form

(Note: This form must be completed by the Funeral Home and emailed to the Fremont Town Hall no later than 24 hours prior to the scheduled interment. Request for interments held on the weekend must be submitted on the Thursday prior to the service at 4:00pm at cemetery@fremontnc.gov)

Name of Funeral Home: _____ Representative: _____

Full Name of Deceased: _____

Address of Deceased: _____

Date of Birth of Deceased: ____/____/____ Date of Death of Deceased: ____/____/____

City/Town of Birth: _____ Birth State: _____

Funeral Date & Time: _____ Arrival to Cemetery: _____

Eulogy Location (Check One): ☐ Church ☐ Chapel ☐ Graveside

Veteran (Check One): ☐ Yes ☐ No

Will the Deceased Be Cremated? (Check One): ☐ Yes ☐ No

Cemetery (Check One): ☐ Fremont Cemetery ☐ Elmwood Cemetery

Oversized Casket (Check One): ☐ Yes ☐ No Grave Liner Type: _____

***** The Town of Fremont Requires that a Grave Liner Must Be Used for All Burials*****

Section to Be Completed By the Town of Fremont Cemetery Superintendent or Designee

Owner of Grave Plot: _____

Owner's Address: _____

Lot# _____ Block: _____ Section: _____

Deed# _____ Amt. Paid _____ Receipt# _____ Date of Deed: ____/____/____

Employee Receiving Request: _____ Today's Date: _____

"The Daffodil Town"