

Burial Permit Instructions

City Cemeteries, Gaffney, SC

Section 8-3 (a) of the Code Of The City Of Gaffney South Carolina states that “*Any person desiring to make an interment in a city cemetery shall obtain a permit in a manner provided by the city and shall furnish such information as the city shall require. The city shall keep such records relative to permits as may be necessary and advisable. When the applicant has complied with necessary regulations, a permit shall be issued. No burial shall be had without such a permit*”.

In accordance with the above section of code, the City of Gaffney will require the attached “Request for Interment – Burial Permit” form to be completed and submitted to the Cemetery Superintendent before any interments are allowed to take place. When requesting to make an interment, please fill out the attached form with as much information as is available to you. If you are unable to provide some of the information listed on the form, you may contact the Cemetery Superintendent who might be able to obtain further information such as lot number and plot ID.

The Cemetery Superintendent may be contacted through the City of Gaffney, Community Development Department by using the following information:

- Community Development Phone: (864) 487-8500
- Cemetery Superintendent Office Phone: (864) 206-3305

Once completed, the Burial Permit form may be submitted to the Cemetery Superintendent in one or more of the following ways:

- Deliver to: Gaffney City Hall, 2nd Floor, 201 N Limestone St., Gaffney, SC 29340
- Mail to: P.O. Box 2109, Gaffney, SC 29342
- Email to: sbollhoefer@cityofgaffney-sc.gov

A PDF copy of the Burial Permit can be downloaded at the following web site:

- www.getintogaffney.com/community-development under the “Miscellaneous Forms” section.

Request for Interment - Burial Permit for City Cemeteries, City of Gaffney, SC

Permit #:

The undersigned wishes, on the _____ day of _____, 20____, to deposit in a common grave the following remains:

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| Cemetery Name: |
| Lot Number and Plot ID: |
| Cemetery Street or Alley Name: |
| Deed Number (if assigned): Please provide copy of deed |
| Owned by (Proprietor): |
| Decedent Name: |
| Decedent Date of Birth: |
| Decedent Date of Death: |
| Type of Burial: (In-ground vault, Above-ground structure, or Cremation) |

This request form, properly signed must be received by the Cemetery Superintendent at least two working days before the interment. Every request for interment must be signed by the proprietor, or his or her legal attorney; and after the decease of the proprietor, by some authorized person.

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| Name of Proprietor, Legal Attorney or Heir who is authorizing the use of this lot: | <u>Please include a phone number for the proprietor below:</u> |
| Print Name: | Signature: |
| Date: | Proprietor's phone number: |

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| Name of Funeral Home Conducting Burial: |
| Date of Funeral Services and Burial: |
| Signature of Funeral Director: |
| Date: |

No interment shall be made until fees for the intended cemetery lot or plot have been received by the City.

All burials must conform to the **Rules and Regulations for City of Gaffney Cemeteries** document.

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| Cemetery Superintendent Name: |
| Signature: |
| Date Payment Received: |
| Amount Paid: |