

SUISUN FAIRFIELD CEMETERY

1707 Union Ave. - P.O. Box 3314 Fairfield, CA. 94533

(707) 425-1622

FAX (707) 399-7754

Marker Application and Authorization

Date _____

Memorial Supplier _____ Contact Person _____

Fax Number _____ Contact Number _____

Grave of _____

Section _____ Row _____ Plot/Block _____ Grave(s) _____

Date(s) of Death _____ Date(s) of Interment _____

Marker Foundation Size – Length _____ Width _____

Marker Size – Length _____ Width _____ Height _____

Base Size – Length _____ Width _____ Height _____

Material Type: Granite or Bronze (Please Circle)

Markers must conform to the cemetery rules and regulations in effect at time of installation. Copies of rules and regulations are available at the cemetery office or online at www.solanocemeteries.us

I/We as plot owners, or next of kin, agree to the terms of the Suisun Fairfield Rockville Cemetery District rules and regulations as established or hereafter amended or enacted.

Signature of Plot Owner(s)/next of Kin: _____

Dated _____

MARKER DIAGRAM



Foundation proper size
Proper location
Disapproved _____

Indicate vase location on diagram

Cemetery approval by: _____ Title _____ Dated _____