



Town of Franklinton

101 N Main St
Franklinton, NC, 27525
919-494-2520

Cemetery Action Form

This form is for all actions performed in Fairview or Evergreen Cemetery, including but not limited to the digging & installation of graves, corner markers, headstones, columbariums, mausoleums, and the performance of funeral services. Please submit to town hall staff 48 hours prior to action by emailing Chris George at cgeorge@franklintonnc.us or by bringing the form in person. **No action may be performed until this action has been approved.**

Business Information

Company Name _____

Address _____ City _____ State _____ Zip _____

Phone Number (Work) _____ (Cell) _____

Company Representative Signature _____ Date _____

Date Work to be performed _____

Work To Be Performed _____

Customer Information & Details

Customer's Name _____

Address _____ City _____ State _____ Zip _____

Phone Number (Home) _____ (Cell) _____

If relevant to action, please provide the following information:

Deed Holder's Name _____

Address _____ City _____ State _____ Zip _____

Cemetery (Circle one) Fairview Evergreen Deed Number _____ Lot Number _____

Deceased Name _____

Address _____City _____State____Zip_____

Customer’s relation to deed holder_____

Customer’s relation to deceased_____

Extra items:

Please provide any copies of proofs of headstones or any engraving work done.

Additionally for all burials, entombments, and interments, please provide death certificates for the deceased.

Any requests for services from the Town?

Authorization of action(s) to be performed

Town Representative _____

Date _____