TOWN OF CLAYTON OPERATIONS CENTER

"SERVICE"

ELECTRIC SERVICE (919) 553-1530

VEHICLE MAINTENANCE (919) 553-1530



"ENVIRONMENT"

PUBLIC WORKS (919) 553-1530

WATER RECLAMATION (919) 553-1535

DEPARTMENT OF PUBLIC WORKS - PROPERTY MAINTENANCE DIVISION CEMETERIES (TITLE IV, CHAPTER 92)

PERMIT OF ACCESS

I,______, representing _____

Public Works & Utilities Director	Date
Funeral Home Director or Representative /Monument Company	Date
The Town will maintain responsibility for identifying grave boundaries and demarcatin markers. The Town will be responsible for inspecting the site(s) after the marker insta conformance. If any discrepancies are noted during these inspections the Permittee sh correction of all discrepancies within five working days. If discrepancies are not corrective Town will assume responsibility and bill the Permittee for any and all corrective act the right to revoke the Permittee's permit if unsatisfactory performance continues or f be required by the Town to verify conformance with specifications.	allation is complete for the purpose of verifying all be notified and shall be held responsible for vected by the Permittee within the allotted time, tions(s) taken by the Town. The Town reserves
For services scheduled during a weekday, the Town must be notified and the gravescheduled to take place. For services scheduled on Saturday, the Town must be notified No interments will take place on any Sunday, Good Friday, Thanksgiving Day, Christ maintain all responsibilities related to grave purchasing and associated perpetual care of	ed and the grave paid in full by noon on Friday. tmas Day or New Year's Day. The Town shall
The Town shall require the Permittee or potential Permittee, desiring to utilize Tow completed permit application, with fees paid in full (if applicable), on or before Novemunderstands that the period just prior to a funeral is both critical and stressful, but Permittee provide the Town as much notice as possible and supply all pertinent in funeral). It shall be the responsibility of the Permittee or authorized representative services.	mber 30, for the next calendar year. The Town the Town would respectfully request that the formation (grave location and date & time of
hence forward referred to as the "Permittee", hereby attest that all requirements specific to as the "Town", and the Town's Cemeteries Ordinance (Title IV, Chapter 92) have insurance shall be submitted and maintained active throughout each calendar year. If change, I must report said changes, in writing, to the Town within ten (10) working changes affect my ability or my authorized representative's ability to maintain sufficient to revoke this Permit of Access. I also understand that I must reapply for this per applicable), and any other required supporting information, if this permit is revoked for permit revocation within ten (10) working days of original notification.	re been met. I understand that a certificate of at anytime the status of this certificate should g days of the changes. If the aforementioned and coverage I understand the Town has the right mit, including application, application fees (if