

**TRANSFER INTERMENT RIGHTS
CALVIN UNION CEMETERY**

To: **Calvin Union Cemetery**
c/o The Corporation of the Municipality of Calvin
1355 Peddlers Dr., R.R.#2
Mattawa, Ont. P0H 1V0.

Please be advised that I/We _____ being the Interment Rights Holder/s
(PRINT Full Name/s of Owner/s)
of Lot/s _____ Plot _____ do hereby authorize the Corporation of the
Municipality of Calvin to transfer interment rights of Lot/s _____ Plot _____
in the Calvin Union Cemetery to the said _____.
(PRINT Name of New Interment Rights Holder)

Given under my Hand this _____ day of _____, _____.

Signature: _____
(Name of Owner/s)

Witness: _____

Signature of Municipal Clerk-Treasurer
(once form has been completed and fees have been received)

Date Transfer Completed

Note: All applicable fees as per the Rate of Tariffs must be received in the office prior to the completion of Transfer.
Thank you