

MARKER DESIGN / INSTALLATION / STAKING APPLICATION **EFFECTIVE MAY 1, 2004**

WOODLAWN GARDEN OF MEMORIES, INC. HOUSTON, TEXAS.

IF THE DIAGRAM AND SPECIFICATIONS AS SHOWN BELOW ARE IN ORDER AND COMFORM WITH THE RULES AND REGULATIONS OF WOODLAWN GARDEN OF MEMORIES, INC., THIS IS YOUR AUTHORITY TO INSTALL.....

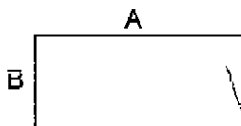
____ MARKER.....\$ _____
 ____ CORNER POSTS.....\$ _____
 ____ PAYMENT ATTACHED.....\$ _____

ON SPACE(S) _____ UNIT _____ LOT _____ BLOCK _____

DIAGRAM OF MARKER MUST BE DRAWN IN SPACE BELOW INCLUDING COMPLETE INSCRIPTION

Marker Specifications

Length (A) _____
 Width (B) _____
 Thickness _____



GRANITE

BRONZE

COLOR: _____
 LETTER STYLE: _____
 VASE: Yes _____ No _____

MANUFACTURER: _____
 LETTER STYLE: Oval _____ Flat _____
 OXIDATION: _____
 VASE: Yes _____ No _____

The undersigned lot owner or legal representative, together with the monument dealer, hereby declare that the above information is correct, and agree to abide by the Rules and Regulations of Woodlawn Garden of Memories and Woodlawn Garden of Memories is hereby authorized to remove at the expense of the monument dealer and the lot owner the foundation and any monument, memorial or marker set on above lot that, in the judgement of the cemetery management, does not meet the standards of memorials permitted in Woodlawn Cemetery. Woodlawn cannot be responsible for misunderstandings occurring between monument dealer and his customer.

Woodlawn Garden of Memories is hereby released from any and all liability in connection with any damages whatsoever that may be sustained now or hereafter by any memorial and/or markers set on my cemetery lot.

_____ <i>Lot Owner</i>	_____ <i>Purchaser (If Other Than Lot Owner)</i>	_____ <i>Memorial Dealer</i>
_____ <i>Signature</i>	_____ <i>Signature</i>	_____ <i>Signature</i>
_____ <i>Address</i>	_____ <i>Address</i>	_____ <i>Address</i>
_____ <i>City State Zip</i>	_____ <i>City State Zip</i>	_____ <i>City State Zip</i>
_____ <i>Telephone</i>	_____ <i>Telephone</i>	_____ <i>Telephone</i>

Based on the above information, approval is hereby granted, _____
Cemetery Representative