

14659 I-10 East Freeway

Houston, TX. 77015

(713)453-7114 / Fax (713)453-2964

## **FASCSIMILE TRANSMITTAL FORM**

To: Head Stone World Houston *AH. Miley
From: Patricia Hardin  Samantha Cantu Amelia Cerda
Ryan Pinero  Yaritza Garza  Angie Ojeda  Susie Zuniga
☐ Michael Garcia ☐ Carla Flores ☐ Matthew Godfrey
☐Cynthia Warren
Date: 1-5-2018
Fax: 877-334-2566
Number of Pages (Including Cover):  If you don't Receive all pages of this this transmittal, please contact sender at (713) 453-7114.
Message: Outside Vendor Application & 72 hr. Notice Let me know if you have questions.
let me know if you have questions.
The Information contained in this facsimile message is privileged and confidential and is intended only for

The Information contained in this facsimile message is privileged and confidential and is intended only for delivery to the addressee; you are hereby notified that any dissemination, distribution or copying of the message is strictly prohibited. If you have received this message an error, please immediately notify us by telephone and return the original message to us at the above address via U.S postal Service. Thank You.

	Officer's possession		and Block, Row or er, Columbarium		Space, Crypt, Cryptorium, Niche				
		Mausoleum							
	-	a ill be entire controls)							
	The memoria Space #	l will be set on space(s) Name:		Space#					
	Space #	Name:		Space #	Name:				
	Space # Name:			Memorial Layout					
	Lot Layout			(10110111111111111111111111111111111111					
			1		·				
•				}					
					• •				
				1					
				İ		· .			
				į		<u>.</u>			
	<u></u>	<u> </u>		<u> </u>					
	Upright Memorial			Flat Memorial					
-	Gener	ai Information	Material	General L	oformation	Materia			
	Tablet Size			Size					
	Base Size			Base		<u> </u>			
	Color			Base Color					
	Vase(s)		<u> </u>	Vase(s)					
	We, the undersigned, hereby agree that this application must be submitted and approved by the cemetery office before setting. Failure to do so releases the cemetery from any responsibility for not setting the memorial for any reason.  We, the Lot Owner, Purchaser of Memorial and Dealer, guarantee the memorial herein described shall comply with Rules and Regulations of the Cemetery covering memorial work.								
	Ric Vaic? suo	Regulations of the Con-	*						
×	Purchaser Signatu	rc .		Lot Owner Signature (if owner is deceased, LEGAL heir and relationship.)					
	Address	<del></del>							
,									
Ĺ	Phone Number			.' Dhaas	<b>^</b>	••			
7	Memorial Con	ipany		Phone	Contac				
proj		authorization: Verifying above and lot owner appregulations.		Park Superinten- all memorial place described above.	dent: Verifying mement rules and re	emorial describe gulations for the			
A	horized Campte	ry Office Representative	e Date	Park Superintende	mi				
	THE PERSON LABORATION	- 7 - 2-23 3 prepresentative	1/4K5	,		, .			
<u></u>				the state of the s					

DATE:				
<b>72</b> - H	IOÙR NO	TICE		
IN COMPLIANCE WITH THE RULES AN FLAGGING/ POURING FOUNDAION CEMETERY. CONSIDER THIS AS WRITT POUR FOUNDATION FOR:	IN SOUTH P.	ARK ÇEME	TERY/ S.	AN JACINTO
DECEASED NAME:	· 	·		<u>.                                    </u>
SECTION:	LOT:	SPAC	E(S):	
VENDOR WILL ARRIVE ON:		AT :		(a.m./p.m.)

MEMORIAL DEALER DATE

\*\*PLEASE NOTE IF YOU DO NOT SHOW THE DAY YOU SCHEDULED THE STAKE OUT, A REFLAGGING FEE WILL APPLY.



