OAK HILL CEMETERY
BUY BACK CEMETERY SPACES FORM

Name of purchaser(s): _____

Legal Description of Land _____

_____

Spaces Purchased: _____

Date of Original Purchase: _____

Amount Paid at Time of Purchase: _____

Name of Person(s) Making Request: _____

Date Written Request Received: _____

Relation to Purchaser: _____

Reason for Sell Back: _____

Amount Due to Seller: _____

Date Confirmed by Sexton: _____

Adjustment made in Book (circle one): New Old Page No.: _____

Other Pertinent Information: _____

_____

City Manager Approval of Buy Back of Oak Hill Cemetery Spaces:

_____ Date: _____
(Signature)

City Clerk's Signature upon Transaction Completion: _____

_____
(Date)